























October 1, 2013-September 30, 2014

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Prepared By: Pact, Inc. 1828 L Street, NW, Ste. 300

Washington D.C. 20036, USA Tel: +1-202-466-5666 Fax: +1-202-466-5665 info@pactworld.org

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Index of Acronyms and Abbreviations

AHW Animal Health Worker AMW Auxiliary Midwife

ARI Acute Respiratory Infections

BHS Basic Health Staff

BWP Beneficiary Welfare Program

CA Change Agent

CAP Community Action Planning
CBO Community-Based Organization

CDC Community Development Organization

CDK Clean Delivery Kits
CESVI Cooperazione e Sviluppo

CHD Community Health and Development

CME Continuing Medical Education

COP Chief of Party

COPI Community Organizational Performance Index

CSO Civil Society Organization
DALY Disability Adjusted Life Years

DCOP Deputy Chief of Party
DOA Department of Agriculture
DOH Department of Health
EC Environmental Compliance

EPI Expanded Program for Immunization

FEG Farmer Extension Group FFS Farmer Field School FPL Fly-Proof Latrines

FY Fiscal Year

GFWS Gravity Flow Water System
GOB Government of Burma
HBB Helping Baby Breathe

HSS Health Systems Strengthening

ICT Information Communication Technology

ICT4D Information Communication Technology for Development

IDP Internally Displaced Person

IEC Information, Education and Communication INGO International Non-Governmental Organization IOM International Organization for Migration

IRC International Rescue Committee KMSS Karuna Myanmar Social Services KnMHC Karenni Mobile Health Clinic

KSDA Kayhtoeboe Social Development Association

LBD Livestock Breeding Department LCSO Local Civil Society Organization

LNGO Local Non-Governmental Organization

LPI Local Partner Initiative
MCH Maternal and Child Health

MCHD Maternal and Child Health Defender

MCL Malaria Control Leader

MNCH Maternal Neo-Natal Child Health
MOU Memorandum of Understanding
MSE Micro and Small Enterprise
MSI Marie Stopes International

MSY Mya Sein Yaung (government development fund)

MTE Mid-Term Evaluation

NGO Non-governmental Organization
OCA Organizational Capacity Assessment
OPI Organizational Performance Index

ORT Oral Rehydration Therapy
PGMF Pact Global Microfinance Fund
PMP Performance Management Plan
PPP Public-Private Partnership
RDA Rural Development Association

RHC Rural Health Center

RWCT Rain Water Collection Tank SBA Skilled Birth Attendants

SDF Swanyee Development Foundation

ST Shae Thot

TMO Township Medical Officer

TOT Training of Trainer
TT Tetanus Toxoid

USAID United States Agency for International Development

USG **United States Government** VDC

VHDF

Village Development Council
Village Health and Development Funds
Village Water Committee
Water, Sanitation and Hygiene
World Bank Community Driven Development project
World Health Organization VWC WASH

WB CDD

WHO







Program Year 3 Annual Report: October 1, 2014 - September 30, 2014

Shae Thot Program: USAID Cooperative Agreement No. AID-486-11-00010

COUNTRY CONTACT

Matthew Tiedemann, Chief of Party

Pact, Inc. Penthouse, 608 Bo Son Pat Rd. Pabedan Township Rangoon, Burma

Phone: +95 1 501373, 501383

Fax: +95 1 501383

Email: mtiedemann@pactworld.org

HEADQUARTERS CONTACT

Mark Miebach, Senior Director, Agreement Management

Pact, Inc. 1828 L St. NW Suite #300 Washington, DC 20010

Phone: 202 466 5666 (office)

Fax: 202 566 5665

Email: mmiebach@pactworld.org

PROJECT SUMMARY

USAID CA No: AID-486-11-00010 Donor: USAID RDMA Bangkok Agreement Officer: Martha Aponte AOR: Joanna Ribbens

Total Award: \$54,999,443 Obligations: \$34,476,026

Proposal Submission: June 14, 2011
Project Start Date: September 27, 2011

Project End Date: September 26, 2016

Reporting Period: October 1, 2014-September 30, 2014



1. Program Overview

USAID Cooperative Agreement Number AID-486-11-00010 was executed and became effective on September 27, 2011. This Cooperative Agreement awarded \$54,999,434 to Pact, Inc., to implement "Shae Thot: The Way Forward," a five-year program proposed by Pact in response to USAID's Humanitarian Assistance in Burma USAID-Burma-486-11-031-RFA. Obligations to date from USAID total \$42,476,026 to achieve the goals and objectives of Shae Thot over the five years of the program. Pact has spent or sub-obligated \$35,470,900 against this amount. Pact, in partnership with CESVI, Marie Stopes International (MSI), Pact's Global Microfinance Fund (PGMF), UN-Habitat and seven local partners in Kayah State and Central Burma, implements a program that strengthens social and community institutions for development and provides comprehensive services for maternal and child health; livelihoods and food security; and water, sanitation and hygiene.

Funded through USAID's humanitarian assistance mechanism, the Shae Thot program offers an integrated community development service-delivery model that puts communities at the center of a process of building their own capacity for decision making and long-term planning. The Shae Thot consortium partners have found that working through grassroots entities, such as village development committees, achieves efficient and effective development while empowering villagers to have a stronger voice in local decision-making processes, modeling good governance at the local level and building linkages to the evolving formal local government system. Pact has also begun engaging local organizations to integrate their experiences and priorities into programming that builds community resilience. Through partnership, Pact is strengthening the capacity of these organizations, while creating a network of local groups working toward locally driven development solutions.

Shae Thot Villages					
	Year 3	Year 3	Program	Currently	
	Q4	Total	Total	Active	
Total (including Cost	85	481	2,177	1,868	
Share)					
By Organization					
Pact MCH	31	478	1,011	716	
MSI	80	197	753	753	
CESVI	0	0	300	300	
Pact WORTH	74	123	338	178	
PGMF	31	91	447	416	
UN-HABITAT	0	191	660	0	
CDA	70	70	70	70	
Swanyee	0	20	20	20	
SVS	47	108	233	108	
Thirst Aid	9	18	18	18	
RDA	0	20	20	20	
KSDA	0	15	15	15	
KMSS	0	15	15	15	

Direct Beneficiaries					
	New in Year 3 Q4	Cumulative			
Health					
Served by community volunteers	5,439	30,656			
Served by mobile clinics	9,075	66,767			
Food Security					
Increased access to credit	8,134	64,557			
Improved agricultural skills	2,857	21,126			
WASH					
Improved access to clean water	69,906	474,445			
Improved access to sanitation facilities	11,980	149,005			

As of September 30, 2014, the Shae Thot project is active in the following townships:

Magway: Sinbaungwe, Seikphyu, Salin, Magway, Aunglan, Yenangyaung,

Pakokku, Yesagyo

Mandalay: Myingyan, Meiktila

Sagaing: Pale, Monywa, Yinmabin, Budalin

Urban Rangoon: Shwepyithar, Thanlyin, Kyauktan

Kayah State: Bawlakhe, Hpasawng

Shae Thot partners are currently active in **1,868¹ villages across 19 townships** in the Dry Zone, Rangoon and Kayah State, and have implemented activities in **2,177 villages**. A total of 1,856,578 individuals live in villages where Shae Thot has worked. The consortium supports a purposeful overlap of services in targeted villages for better community integration and program coordination. As partners continue to expand to new townships over the life of the project, the overall number of villages might not increase as significantly by quarter, but the number of overlapping interventions will increase.

¹ Shae Thot has covered 2,177 villages as of September 2014. 1,868 villages are currently active, due to the end of the MCH and Agriculture 3 year project cycle and completion of WASH projects in a number of UN-Habitat implementation villages. During Quarter 4 of FY 14, Shae Thot has begun implementation in 85 new villages.



2. Operating Environment

After some two and a half years of dramatic reform and rapid change away from a half century of repressive rule, Burma seems to be at a crossroads, and the pace and direction of further reform is uncertain. Transitional processes such as the one Burma is undergoing do not proceed in a linear fashion. On some fronts, developments continue to surprise and enable progress toward advancing reform and development. Other areas are more challenging, and many are indeterminate. This makes for an exceptionally complex and dynamic operating environment.

The country continues to experience flare-ups of **intra-communal violence**, including the March riots in Rakhine, which largely targeted international and multi-lateral organizations, as well as an outbreak of violence in June in Burma's second city, Mandalay, to which the government responded quickly and forcefully. This latter outbreak gave further indication that this challenge is a threat not only to the periphery of the country, but to its very heart. The flare-ups of violence pose an existential threat to the country's stability, and thus to the transition process.

To date these conflicts have had only limited impact on Shae Thot operations, yet they cast a shadow over the entire country, and have necessitated that Shae Thot carefully consider the possible ramifications of new violence and ensure that security procedures are in place to prepare for emergencies. Pact and the Shae Thot partners have also examined and adjusted programming and activities to ensure they are conflict sensitive.

As the situation in **Rakhine** impinges on all other development efforts in the country, USAID and others in the international community have begun to look for ways to create space to reduce tensions, moderate the often-contentious dialogue and identify approaches that can help resolve the challenges in that state. USAID has approached Pact to consider expanding the Shae Thot model in Rakhine State, to provide additional development assistance in one of the poorest states in the country. Such development-focused activity would supplement the substantial humanitarian and relief assistance that has been provided in Rakhine. In the latter part of the year Pact staff conducted exploratory visits to Rakhine state to assess the contribution that the Shae Thot model could make in the state, the ability to implement effectively and the security risks. Should the US Government and the Government of Burma determine that Shae Thot could contribute effectively to improving the state's development, Pact is prepared to pilot adapting the program to address the needs of Rakhine State.

The **cease-fire/peace process** between the central government and armed ethnic groups offers great potential for resolving more than half a century of conflict. Yet the process has extended longer than anticipated and is lately showing signs of strain, indicated by recent isolated cases of armed conflict. The longer the process is prolonged, the more conditions on which the ceasefires were signed could change, thus complicating prospects for full national reconciliation.

The situation indirectly affects Shae Thot's work in Kayah in the southeast, as uncertainty about the process and next steps clouds the view for all parties, yet community needs for basic services persist. In playing its part to meet those needs, Shae Thot partners must carefully walk a line that does not unintentionally affect the balance of power that prevails.

A key benefit of the transition has been **increased space for civil society organizations** to play a more active role in shaping the future of the country. In response to this development, this year Shae Thot launched a Local Partner Initiative (LPI), through which Pact has awarded competitive grants to seven Burmese civil society organizations to implement program activities. In addition to financial support, Pact provides sustained capacity strengthening and mentoring to the local partners.

Burma's **economic growth** is among the most rapid in region, led by foreign investment and tourism, generating optimism about increased prosperity; but to date very little of this increase in wealth is reaching remote, underserved areas. In the **political sphere**, the past year has seen mixed signals. New laws that will substantially affect reforms and the enabling environment for civil society – for example, on media, telecommunications, civil society, land tenure, citizenship and social issues, such as marriage and religion – have been proposed, yet have been subject to prolonged debate. Some parts of the Government of Burma have begun to consult with the public, but this is a nascent effort, and how decisions are made and who truly holds power are not always clear. Political processes and participation are at risk of not keeping pace with expectations raised by the initial phase of reforms. Both government and opposition alike seem to be wary of political consequences of their actions, especially in the lead-up to the 2015 elections. Such pre-electoral considerations may contribute to continued lack of clarity and closure on a range of issues.

In the course of program implementation, however, Shae Thot staff are finding generally **increasing receptivity on the part of government** officials to the program's work and a willingness to engage in substantive discussion. Government officials at all levels in the areas Shae Thot operates have heard the Union President's message that international development organizations are welcome partners, and have demonstrated interest in development and appreciation of the work that Shae Thot has accomplished. Some officials have noted that the project's areas of intervention address key needs in their constituencies and have requested that Shae Thot keep government staff up to date on program activities, to facilitate coordination and thereby ensure maximum use of development investments.

Shae Thot has begun to offer limited **technical assistance to government development efforts**. After learning of the success of the program's Village Development Funds (VDF), the chief minister of Sagaing region requested technical assistance for a pilot village poverty alleviation fund, called Mya Sain Yaung (MSY), which was to launch in 101 villages in three townships. In July and August, Pact introduced the government MSY trainers to the key elements of success of the Pact VDF model, including community ownership; clear communication about the program with the entire village; the election of fund managers by the community; and a transparent reporting process for how funds are used. The workshops covered VDF program methodology, guidelines, forms and monitoring processes. If successful, the MSY could potentially institutionalize a model that has proven to be a powerful development tool. The substantial infusion of funding to villages, from this or other projects, will inevitably affect community development efforts implemented by Shae Thot and others, with possible unanticipated consequences.

Shae Thot also has begun to contribute to **strengthening of the formal health system**, including providing technical assistance on mobile health information systems and training auxiliary midwives. At the end of the year, Shae Thot's regional team in Mandalay conducted a pilot workshop on issues of **governance**, **accountability and transparency** for mid-level government officials. While participants found some topics unfamiliar, overall they expressed great interest in the new knowledge and a desire for further such training. Pact believes that increased understanding of issues such as these will facilitate easier and more frequent interactions among Shae Thot village development committees and

government authorities, thereby amplifying the voice of communities and contributing constructively to the national decentralization process under way.

Recognizing the power of the **growing international corporate presence** in Burma, and the mutual interests of the Government of Burma, the U.S. Government, corporations and Pact, Pact has actively developed opportunities for public-private partnership (PPP) around the Shae Thot program. In January Pact initiated the second phase of the Chevron-supported SHINE project, which includes a cost-sharing input from Shae Thot, in order to leverage investments from both Chevron and USAID. In May, the U.S. Government/USAID, Chevron/UNOCAL and Pact signed a PPP agreement to conduct health and livelihoods programming to strengthens rural communities across Myanmar.

Shae Thot seeks to enable communities to manage their development needs more effectively and beyond the life of the program – in essence, to foster greater community resilience. Evidence generated this year has demonstrated that the program's interventions are contributing to these objectives of **durability and resilience**. As described in the text to follow, early findings from the Shae Thot Community Organizational Performance Index demonstrate that Shae Thot's focused efforts to strengthen the capacity of village development committees result in **better-performing VDCs**. Routine data collection from the program's agricultural interventions demonstrate **substantial increases in yields of key crops**. In addition, the WORTH women's empowerment project has **substantially increased the monthly incomes** of thousands of women, benefitting them, their families and their communities. In the final quarter of the year, Pact's subsidiary Institute supported a study of Village Development Funds established under Shae Thot and prior to the program, and found that **more than two-thirds of VDFs continue operating and successfully growing their resources after program support has ended**. Finally, Pact contracted an external firm to conduct a mid-term evaluation of Shae Thot; results of this evaluation will be available early in the new fiscal year.

3. Details of Current Progress toward Program Objectives and Deliverables

SHAE THOT'S INTEGRATED DEVELOPMENT MODEL

OUR APPROACH

Shae Thot's integrated development model revolves around our archetype, Ma Mya, who represents every woman, man, child and community that our project serves. Ma Mya is at the very center of our integrated programming and serves to focus our attention on the purpose of our work, whether it is in offering community-based health care services, increasing agriculture yields through improved farming practices or building the capacity of civil society organizations and local governance structures to better respond to community needs.

Ma Mya's world sits at the center of multiple spheres of influence in which what she needs and desires in her own life are the primary driving factors for development. Her well-being in health, economic empowerment, food security and WASH, and the capacity to achieve her personal family and community aspirations are supported by an integrated, locally driven approach to development.

This approach combines grassroots governance through Village Development Councils (VDCs), financial sustainability through Village Development Funds (VDFs) and community education in key sectors. By providing information and capacity development support, and a combination of key services and products, Shae Thot contributes to Ma Mya's self-directed growth and development. By placing Ma Mya, her family, and her community, at the center of the development process, Pact is building sustainable, resilient communities across the nation.



OUR METHODS

In Ma Mya's village, and over 2,000 others like hers across Burma, Shae Thot uses VDCs and VDFs as a platform for integrating technical interventions in:

- primary health care for mothers and children,
- agricultural intensification and diversification,
- small livestock management,
- formal credit provision,
- women's empowerment-based savings groups, and water system development.

Each of the project components uses a community-based mobilization mechanism to train volunteers for specific services related to different interventions. Villages have multiple funds available to them including the VHDFs, WORTH savings groups, and animal and seed banks to support and finance this work. All of these activities are structured around the VDC, a community-elected governing body that stands alongside official leadership in the village. VDCs support good governance, build community capacity and serve as an integral focal point for community leadership and participation.

OUR PRINCIPLES

The Shae Thot project embodies four interlinking principles to guide in all of the integrated sectoral work:

- **Inclusive and Participatory Decision Making:** Community decision making in Burma has traditionally been limited to unelected male leaders appointed by the government. To move past this limited and directive type of leadership, Shae Thot promotes inclusiveness, participation and a culture of dialogue throughout its activities and community planning processes.
- Transparent and Accountable Community Planning, Implementation and Monitoring: Decision makers and the agencies that control resources are more accountable when community members not only understand what decisions were made, but also how they were made and how they can be monitored. Transparent and accountable community planning, implementation and monitoring ensure that community institutions can efficiently and effectively address development needs.
- Community-Based and Local Solutions: Pact and its partners believe that resolving difficult development challenges requires involving and engaging the capacities and skills of local partners, who are often best placed to define and implement solutions to their own problems. Furthermore, putting the community at the forefront of these processes creates a sense of ownership contributing to the sustainability of the program.
- **Flexibility:** Given the inherent uncertainty of Burma's rapid changes, Shae Thot incorporates robust mechanisms of flexibility to respond to evolving windows of opportunity and address new challenges.



Ma Mya's enabling environment

COMMUNITY INSTITUTIONS AND LOCAL GOVERNANCE STRENGTHENING

Overview

Shae Thot empowers Ma Mya and her fellow villagers, who sit at the center of multiple spheres of influence in their communities, to engage in a community governance system that builds, maintains and sustains thoughtful and meaningful improvements to their health, wealth and development. Shae Thot partners with communities to perform meaningful work that links them to greater emerging opportunities through the establishment and development of Village Development Committees (VDCs) as the primary unit for community institution building. Shae Thot also works to strengthen emerging civil society through the Local Partnership Initiative (LPI), which engages with local NGOs and community-based organizations to support locally created and implemented development projects, while developing partners' organizational capacities and roles as change agents.

Results to Date: Community Governance Strengthening

The decentralization process, widespread informal community governance institutions, and a groundswell of activity from Burmese civil society create fertile ground for the Shae Thot program to deepen its roots, expand its reach and broaden its impact in support of the country's push for greater freedom and democratic governance. In this vein, this part of the program aims to achieve the following objectives:

- Communities create a **shared development vision** that includes more equitable access to and control over resources.
- Community institutions are able to address their humanitarian development needs.
- Communities **share knowledge and collaborate** with one another, the public sector and other actors to achieve development goals.
- Local Civil Society Organizations are **better able to support** community projects that meet local development needs.

We accomplish this through three programs interwoven into the fabric of Shae Thot's integrated approach:

- 1. **VDC Pilot** identifies capacity development interventions that lead to stronger, more capable governing bodies at the community level.
- 2. **Village (Health and) Development Funds** a series of workshops and trainings for communities resulting in community managed and owned funds to address priority development needs and build resilience against eventual catastrophes.





Top: A VDC leader

Right: A VDC sub-group meeting



Summary of Key Results – VDC Pilot:

- Launched in FY14
- Established in 135 randomly selected villages across 12 townships
- Baseline performance assessments conducted in 118 villages
- Financial Management and Foundations Trainings conducted in 113 pilot villages
- Identified priority intervention areas for FY15

3. **Local Partner Initiative** – engages seven local partner CSOs in the design, delivery and monitoring of technical interventions in MCH, WASH and livelihoods, as well as invests heavily in organizational systems strengthening, coaching and mentoring through tailored, partner-led capacity development.

VDC Pilot Program

The VDC pilot program is an integral component of Shae Thot's local governance and community strengthening objective. Launched in FY14 and administered by the Pact Shae Thot Institutional Strengthening team, the pilot allows Shae Thot partners to design, test and demonstrate what kinds of capacity development interventions lead to stronger, more capable governing bodies at the community level. We do this by:

- developing VDC Formation Guidance (roles and responsibilities, operating structure, elections);
- assessing VDC capacity (both organizational capacity as well as performance see graph);
- designing and testing tools and approaches;
- · sharing findings; and
- scaling up successes.

VDCs have been an integral and successful component of Shae Thot since its inception. This pilot initiative seeks ways to build upon these successes. In particular, in FY15 the pilot will:

- focus on VDC members who can play a convening, coordination and qualityassurance role;
- stress aspects of good governance including transparency, accountability, responsiveness, participation and inclusiveness;
- engage with Shae Thot partners to identify regular program entry points for reinforcing roles, responsibilities and key concepts;
- identify, connect to and learn from "super VDCs," VDCs that
 - o show exceptional leadership, innovation or dedication to their mandate;
 - link/coordinate different groups in the community to work together on common development challenges;
 - create formal linkages with local government (village tract/ township) for the benefit of the community;



VDC baseline workshop in Yesagyo Township

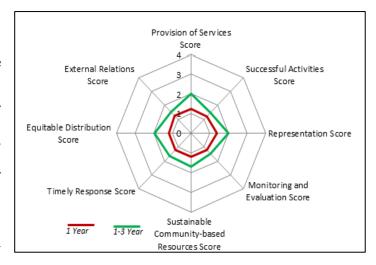


Figure 1: Average COPI score of 118 pilot VDCs in 11 townships – the longer the VDC has worked with Pact the higher its performance at all levels

 are highly visible within the community and/ or highly responsive to the needs of community members.

A major focus of the pilot for the coming year is on beneficiary accountability. This work will be piloted in 135 villages and 12 townships over the next three months. Depending on pilot success and availability of funding, the BA mechanism will be scaled up throughout all of Shae Thot, including all international and local partners, their ST staff, and all VDCs we work with.

Results to Date: Building Community Resilience through Village Health and Development Funds

Shae Thot has facilitated the establishment of community-owned and managed Village Health and Development Funds (VHDFs) in 782 communities across 13 townships to date. Individuals in rural communities often struggle with health catastrophes and other shocks that are difficult to recover from, and financing for these shocks is limited and often leads to unbearable debt. Pact's VHDFs help communities to meet their development needs in a sustainable way, while building resilience against future calamities through community-managed funds. The VHDF model engages communities in a committed partnership, creating ownership and a shared vision through a series of workshops and trainings. Communities elect Fund Management Committees, composed of at least two fund managers and at least two female members. Organizational by-laws are created for the funds, and Pact conducts an official fund handover ceremony, presenting a matching grant to the community and seed money for specific interventions. While fund managers serve as stewards to the fund, communities decide collectively on how best to manage the VHDFs for community priorities.

In Kayah State, VHDFs are still in being established. Shae Thot has redesigned the program in the state in line with area sensitivities and barriers to development. Program changes have included adaptations to the VHDF establishment process. The program has increased the cash grant to communities to boost the capital of the VHDFs. During Year 3, 15 communities in Bawlakhe Township initiated and managed community revolving funds through the VHDF. Despite facing challenges with fund management and the revolving-fund mechanism, the VHDFs have grown to \$11,276, which includes \$1,422 of retained interest from the revolving funds, accounting for 12.6% of total fund growth. In Hpasawng, 22 communities have established VHDFs and 18 received a matching grant from Shae Thot. The total fund value of these 22 VHDFs i \$11,224. Though progress of VHDFs in Kayah State is slow in comparison to the Dry Zone, the growth represents success for Kayah communities that have not previously experienced working as a committee or managing revolving funds.



Shae Thot's Beneficiary Accountability
Board used as a feedback and complaint
mechanism



VHDF training for fund managers

Results to Date: Local Partner Initiative

The Local Partner Initiative also launched this fiscal year with an official ceremony held in January, 2014. Seven local Burmese NGOs and CBOs signed fixed obligation grants totaling \$1,722,116 to operate together with Shae Thot partners in each technical area – livelihoods, WASH and MCH. This was a first of its kind for USAID and Pact in Burma and represents a significant development for engaging civil society in Burma.

The local organizations began their partnership with Pact during an expression of interest phase. After selecting applicants for further engagement, Pact guided potential partners through the proposal development and budgeting phases. Once signed, local partners engaged in a series of trainings covering monitoring and evaluation, finance, fraud prevention and compliance. Pact's M&E and grants and contracts officers provide mentoring, having made a total of 63 visits over the past year. Pact's technical leads and regional coordinators also maintain close relationships with our local partners, helping to establish them in the target townships, introducing them to government authorities and other Shae Thot partners operating in the area, guiding them on village selection, and ensuring quality and timeliness of project deliverables.

Lastly, the Shae Thot Institutional Strengthening team has worked intensely with the local partners to establish capacity and performance baselines, establish capacity development plans and budgets and identify relevant resources. For many of our grantees, Pact's Organizational Capacity Assessment (OCA) was their first-ever deep dive into their organization. The OCA is itself a capacity development exercise that allows an organization to reflect and have an open conversation about what is working and what needs to be improved. The OCA results in an institutional strengthening plan, which prioritizes improvement areas, sets development goals and identifies leaders and resources to achieve them. As seen in Figure 2, which shows baseline average OCA scores of the seven Local Partners. Capacity areas of focus include Organizational Management, Program Management, Human Resources Management, Administration, Financial Management, Financial Sustainability, Networking and Knowledge, and Organizational Spirit. Human Resources, Administration and Program Management were highlighted by a majority of Local Partners as areas for improvement in their Institutional Strengthening Plans.

For many of our stakeholders, Village Development Committees represent their first experience with a democratic process. VDC members are elected by the villagers and represent their community only at the behest of their peers. VDCs offer a viable way forward for

Summary of Key Results - LPI:

- Seven Burmese NGOs received Fixed Obligation Grants averaging \$246,000 each
- Engagements cover MCH, WASH, Livelihoods and include heavy capacity development component
- Local Partners established in eight townships and 266 villages
- Established Organizational Capacity baseline, network baseline, and performance baseline for all grantees
- All partners received intensive coaching and mentoring support in M&E, grant reporting and compliance, and technical approaches



Prioritization exercise for Institutional Strengthening Plan with Kayah-based Kayhtoeboe Social Development Association

communities to create a shared development vision and to prioritize, organize and coordinate a collective response to pressing challenges. The VDC can also represent its community when engaging with other communities, NGOs or even local government. If successful, these local organizations will live well beyond the life of Shae Thot. VHDFs are an integral component to the long-term sustainability of the VDC. The funds provide VDCs with the means for collectively financing projects that are not possible through other funding sources. In Burma, with historically low governmental investment in health and infrastructure, alternative opportunities to finance community improvements are instrumental in supporting local development and sustainability.

In addition a vibrant and capable civil society can help address fundamental gaps in the provision of basic services to the vast majority of Burma's poor. By strengthening the internal systems, skills, capacity and policies of an organization, Pact can help partners improve performance in planning and managing responsive and accountable community development activities. This in turn positions local civil society organizations to support community projects that meet local development needs.

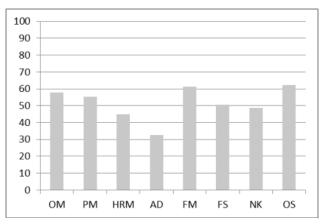


Figure 2: Baseline average OCA scores of the seven local partners

Community-Managed Maternal and Child Health

Overview:

Ma Mya is at the heart of Shae Thot's community-centered approach to improving maternal, newborn and child health in Burma. From equipping Ma Mya and her fellow villagers with health awareness and knowledge so that they have healthy children and families, to training them as community health volunteers, Shae Thot's community-driven process engages Ma Mya and those around her to build community commitment and action to improve health. The Shae Thot model employs a variety of sustainable, integrated interventions to equip families with the knowledge and resources needed to live happier, healthier lives. Community-managed health and development funds offer financing for health emergencies or capital to invest in village-level health improvements, and trained community health volunteers fill gaps in coverage and accessibility, while programming works to support strengthening of the formal health system.

Shae Thot provides technical capacity in two ways: 1) through forming networks of mothers who meet weekly to learn and discuss maternal and child-related illnesses, hygiene and nutrition and 2) through developing a *Change Agent Committee*, composed of fund managers and six community health workers called "Change Agents," who are selected by the community and trained to lead activities to strengthen health-seeking behaviors, home diagnosis and treatment of common childhood illnesses, as well as to facilitate access to care. The services provided by auxiliary midwives (AMWs) and by mobile medical clinics bridge gaps in clinical and reproductive community- and facility-based care in hard-to-reach areas.

Results to Date: Management and Innovations of Maternal and Child Health Interventions

Scale: Building Community-based Safety nets for Maternal and Child Health This fiscal year Pact implemented programming in 14 townships serving a total population of 1,399,282. Five new township operations were opened, while four townships phased out programming, three of which closed early due to limited funding this year; 10 townships remain active.

- *Five new townships opened:* Yenangyaung and Yesagyo, Magway Region; Budalin, Sagaing Region; Meiktila, Mandalay Region; Hpasawng, Kayah State
- Four townships phased out: Myingyan, Mandalay Region; Salin, Seik Phyu and Aunglan, Magway Region





Top: A babyweighing day

Right: Checking nutrition charts



Summary of Key Results:

- 60% of women delivered with skilled birth attendants, 2x the percentage in Year 2
- 93% of newborns received a newborn visit by an MCHD
- 95% of women used Clean Delivery Kits for deliveries
- Children in Shae Thot communities are five times less likely than the national average to suffer from severe malnutrition

This year, Shae Thot conducted community health and development (CHD) workshops for communities like Ma Mya's in 478 villages, reaching 48,389 people (15,218 men, 33,171 women). During the workshops, participants identified maternal and child health problems in their communities, took part in participatory learning on how to identify health problems, and then created community-driven action plans on sanitation activities, such as fly-proof latrine renovation and construction. CHD workshops help place the community at the center of prioritizing needs and creating strategies to ensure that mothers have safe pregnancies. Through improved access to proper nutrition and sanitation, children are protected and nurtured to become healthy adults.

During the year, 1,892 mothers' groups were formed with 24,601 women in 478 communities. To date, 52,529 mothers' group members from 1,009 villages have participated in Pact-led introductory workshops, where they receive self-learning materials to participate in group reading sessions and review key messages surrounding maternal and child health practices. As a result of the mothers' group sessions, community women, especially those of reproductive age, show improved knowledge and behaviors surrounding MCH care. Pre- and post-test assessments have revealed significant increases in knowledge levels pertaining to MCH practices. For example, after the three years of participating in the groups, **knowledge of the importance of clean delivery kits increased nine-fold, from 11% at the beginning of the program to 99%** at the end. The significance of this change is not merely represented at the knowledge-building level, but more importantly **correlates to changed behavior**, as evidenced in increases in clean delivery kit use (see figure 4). Mothers' group reading sessions have revolutionized the way communities receive health education from health personnel, emphasizing participatory learning by doing it themselves, rather than traditional, more passive education methods.

To support community-led processes, Shae Thot facilitates a series of focused MCH trainings to equip community volunteer Change Agents (CAs) to serve as Maternal and Child Health Defenders (MCHDs) responsible for specific MCH-related capacities in their communities. This year, Shae Thot trained 2,376 CAs, who serve on Change Agent Communities with the Village Health and Development Fund Managers. In FY 14, Shae Thot staff trained and supported:

• 505 new MCHD-Level 1 CAs in Maternal and Newborn Care to work with pregnant mothers to create birth plans for clean delivery, assess high-risk pregnancies and infant danger signs and work with auxiliary midwives (AMWs) and midwives (MWs) to help women access antenatal and post-natal care, including immunizations.



Training at a community-based workshop

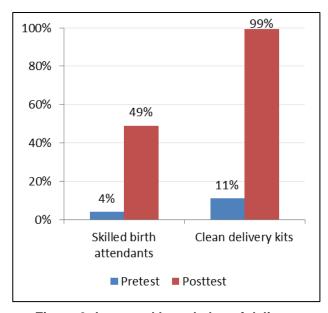


Figure 3: Improved knowledge of delivery practices in Year 1 Townships

MCHDs distributed 7,237 clean delivery kits to enhance clean and safe deliveries, and 1,282,140 iron and folate tablets to 7,123 pregnant women to prevent anemia, a major cause of maternal death.

- **180 new MCHD-Level 2 CAs in Nutrition Promotion** to encourage eating from all three food groups and a greater variety of foods within those groups; identifying the signs and symptoms of common micronutrient deficiencies such as iron and vitamin B1; and organizing community-wide nutrition days at which all under-five children are weighed and monitored for consistent growth.
- **184 new MCHD-Level 3 CAs in Common Childhood Illnesses** for diagnosing, treating and referring diarrhea and acute respiratory tract infection (ARI) cases, including pneumonia. MCHDs distributed 30,550 Oracel Kits (2 ORS packets and 10 Zinc tablets) for at-home diarrhea treatment, a major killer of under-five children.
- 192 new MCHD-Level 4 CAs in Early Childhood Development for psychosocial support and social awareness for families with young children to encourage and promote child-centered learning and protection, including advocating birth registration.
- 297 new WASH Promoters (208 male and 89 female) distributed 21,472 hygiene kits and led household sanitation campaigns to stop diarrhea transmission and promote hand washing, and managed the community action plan on community-led latrine construction.
- 113 Malaria Control Leaders (92 male and 21 female) for malaria prevention, diagnosis and treatment.

Community Action on Maternal and Newborn Care

The MCHD-1 introductory training initiates the community process, equipping Change Agents with knowledge on maternal and newborn care. This year, MCHD-1 CAs gave 2,294 health educations sessions on awareness of maternal and newborn health and danger signs to their villages, in which 42,634 villagers participated (8,707 male, 33,927 female). These MCHD-1s have monitored 3,164 pregnancies to their completion since their training. As the program matures, these mothers continue to experience a significant increase in the amount of care they receive from clinics. As seen in Figure 4, out of the pregnancies recorded, 1,342 (42%) of mothers received four antenatal visits as per the national gold standard in FY 14, nearly twice as many as those who received the same level of care during Year 2. Similarly, 2,295 (73%) received two tetanus toxoid injections, up from 60% last year. Out of 2,395 postnatal cases, a total of 69% (1,656) received a postnatal care visit within the recommended three days by a MCHD-1. Similarly, 93% (4,318) of newborns received a newborn visit by an MCHD-1. During these visits, MCHD-1 CAs take postnatal measurements in order to detect

Filling Gaps in MCH Coverage

MCHDs play an essential role in Shae Thot's community-based MCH program. In rural Burma, medical doctors are only available at the Township Health Hospital, and midwives serve as the primary basic health providers at the community level, covering 5-12 villages each, with a total population of 2,000-4,000. As it is impossible for midwives to monitor and provide care to every pregnant woman in their coverage area, the Pact-trained MCHDs fill this critical gap in the public health system, conducting community health education sessions, identifying pregnant women and under-five children, monitoring pregnant women for danger signs and children for proper nutrition, and providing referrals for further care when needed.

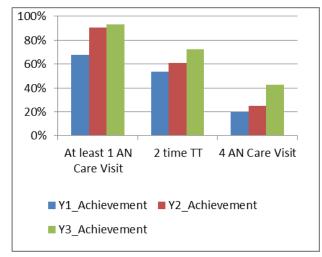


Figure 4: Access to antenatal care in Shae Thot villages

danger signs, including the assessment of rapid breathing and low birth weight for timely referral. This highlights the gap in services at the community level and the critical role that Change Agents are playing in ensuring that pregnant women are identified and referred so that they can access the care that is needed.

Shae Thot communities continued to show significant behavior change in delivery practices towards more hygienic deliveries with trained birth attendants. Of the deliveries monitored by MCHDs, 93% used clean delivery kits for home deliveries (compared to 38% at baseline). This represents a slight decrease from the 96% rate during FY 13, which may be attributed to the influx of new communities from which only baseline data is so far available. As seen in Figure 5, 60% of pregnancies were delivered with skilled birth attendants, which represents a 50% increase over Year 2. Of these delivery cases, danger signs were detected in 309 pregnant women, and 98% were referred for delivery with skilled birth attendants (SBAs), compared with only 53% of pregnancies without danger signs utilizing SBAs. This trend shows that Change Agents have been very effective in providing birth planning and aiding in safe deliveries for life-threatening cases, **contributing to a likely reduction of maternal morbidity**, and bridging the gap in care provided by midwives.

Community Action on Nutrition Promotion and Child Growth Monitoring

Malnutrition is the underlying cause of under-five child morbidity, and contributes to 60% of deaths among children in this age range. Although food scarcity is typically not a major challenge in Burma, micronutrient deficiency (e.g., B1) is common and the national rate for severe acute malnutrition in under-five children is 9.7%. Malnutrition is predominantly caused by a lack of knowledge of what constitutes a healthy diet, as well as misbeliefs related to food intake, especially for pregnant or lactating mothers, newborns and under-five children. Pact-trained MCHD-2s are responsible for promoting nutrition and communitybased monitoring to ensure that parents can make informed decisions about what to feed their children so that they can grow to their full potential. After Shae Thot's Change Agent training on nutrition promotion, and weekly mothers' group reading sessions, communities develop action plans for growth monitoring of under-five children and holding nutrition-day celebrations. This year, MCHD-2s delivered 1,433 education sessions to 37,616 individuals (28,865 female, 8,751 male) on issues ranging from balanced diets to the importance of exclusive breastfeeding and growth monitoring. In Dry Zone townships, MCHD-2s, together with VHDF committees, led 946 Nutrition Day events, in which 50,410 children participated in a "model meal" from the three food groups, teaching parents how to maintain a balanced diet at home. MCHD-2s worked together with midwives to carry out 828 Baby-Weighing Days, during which 26,673 under-five children were monitored. Of those measured, only two

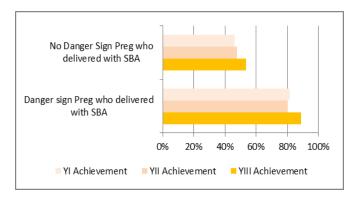


Figure 5: Deliveries with skilled birth attendants for pregnancies with danger signs



Child growth monitoring during a babyweighing day

percent of under-five children fell into the red zone (severe malnutrition requiring referral to a health center for further treatment), 28% fell into the "yellow zone" (need to improve nutritional intake), and 70% were in the "green zone" (proper weight/growth). Compared to national data, Shae Thot-monitored **children are five-times less likely to be severely malnourished** than the national average.

Community Action on Childhood Illness

Acute Respiratory Infections (ARI) and diarrhea account for 27% and 18% of deaths in under-five children respectively. MCHD-3s are responsible for community action plans around common childhood illnesses of diarrhea, ARI and pneumonia. During the year, MCHD-3s led 1,376 awareness-raising health education sessions, involving 26,785 participants (20,936 female, 5,849 male). They increased rates of home-based care, treating 1,333 under-five children for diarrhea, which accounts for 95% of all diarrhea cases treated during the year. Of those treated, 1,239 children (93%) received treatment by ORT and zinc, and 67 children (5%) treated with ORT where then referred to health facilities. The number of children treated for diarrhea by MCHDs during Year 3 increased nearly 22-fold over those treated during Year 2 (1,333 compared to 61), due to the high number of trained volunteers completing training through Year 2 and able to begin effectively detecting and treating diarrhea during the following year. This dramatic increase demonstrates the significance that training and mobilizing MCHDs in Shae Thot communities play in ensuring children receive needed care for this common childhood illness.

Mothers' groups learn about hygiene, especially proper hand-washing and use of sanitary latrines to prevent cases of diarrhea. The results of these lessons, as seen in Figure 7, demonstrate that improvements in women's knowledge on proper hand-washing correlate with improvements in self-reported hand-washing frequency. The most significant increase was the incidence of **hand-washing after latrine use**, **with increased from 47% at the beginning of the program to 71%** three years later. As is typical with behavior change interventions, data revealed that women's reported knowledge of hand-washing practices is still higher than actual practices.

Community Action on Psychosocial Support of Children for Early Childhood Development

Shae Thot programming focuses not only on the physical well-being of children but also aims to support happy, educated children by enhancing an enabling environment through promoting good parenting skills and advocating for children's citizenship rights by obtaining a birth certificate for every child. During the year, newly trained MCHD-4 CAs facilitated

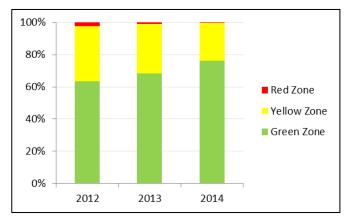


Figure 6: Child weight distribution across the red, yellow and green weight categories

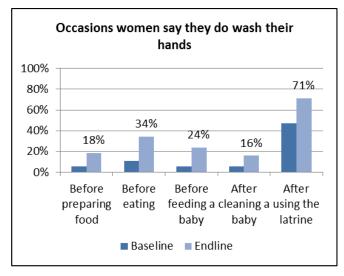


Figure 7: Change in women's reported hand washing behaviors

1,114 health education sessions with 23,233 participants (18,073 female, 5,160 male) to improve parenting skills, including guardian care, psychosocial support for children, and early childhood development. To date, of the 14,785 children documented by MCHD-4s, 61% (8,962) have birth registration cards. Obtaining documented birth registration is important for children to be able to properly access their rights as a child, such as the right to education and protection from child labor.

Community-based MCH Care in Kayah State

Unlike the Dry Zone, Kayah State in the southeast of Burma is a conflict-affected area with many additional operational and developmental challenges, such as pervasive poverty, areas with ongoing security and landmine concerns and very hard-to-reach villages. Since April 2013 Shae Thot has been implementing community-based MCH programming in Kayah State, serving 15 communities in Bawlakhe Township and 33 communities in Hpasawng. During FY 15, the program will expand to cover the remaining hard-to-reach villages in Hpasawng and 17 villages in Mese Township. Shae Thot has trained 15 local staff in Do No Harm approaches and is in the process of modifying programming designs for area sensitivities in line with findings from a conflict assessment conducted last year. The programming has been adapted to provide more service provision, has increased the capital available to communities for VHDFs, has revised self-learning materials to include more audio-visual aids and is supporting township health system strengthening.

This year, MCHDs have been active in raising community awareness for improved health practices in the region, leading learning sessions for 586 women and men of reproductive age on antenatal, natal and postnatal care. They also provided training in 15 villages on safe pregnancy, newborn care, nutrition promotion, common childhood illnesses and trained Malaria Control Leaders in 16 villages to facilitate community action planning around malaria prevention. MCHDs monitored 32 pregnancy cases to delivery alongside midwives, with 97% deliveries using CDKs and 72% giving birth with SBAs. MCHD-2s led 36 Nutrition and Baby-Weighing Days in which 1,071 under-five children participated. As communities in Kayah are especially vulnerable to uncertainty and face many barriers to receiving care, 15 villages in Bawlakhe have initiated community-revolving VHDFs, to provide financing so that community members can access care in the event of an emergency and that villages can mobilize around community initiatives to support health priorities.



MCH Change Agents participate in training



Kayah staff film a clip to produce an IEC video in a local language

Supporting the National Health System and Linking to the Private Sector

Health System Strengthening Activities in Kayah State

Pact works alongside Township Health Departments to support strengthening the formal health sector and facilitate linkages with Shae Thot's community-based activities. During the year, Pact held advocacy meetings with Township Medial Offices in both Bawlakhe and Hpasawng Townships to coordinate around distribution of malaria long-lasting insecticidal nets and sharing project volunteer lists to support the township health system. In Hpasawng, Pact and local partner CDA met with the Township Health Officer to support AMW training and a mass measles immunization campaign to cover hard-to-reach villages. Pact participated in stakeholder analysis meetings with other INGOs (IRC and IOM), sharing information about program activities. Shae Thot has also supported the Township Health Department with its Expanded Program for Immunization (EPI) by providing monthly transportation to midwives in eight hard-to-reach villages. Through their efforts, three villages were able to receive immunizations through the program this year for the first time.

Shae Thot aims to implement programming in all 56 officially documented villages in Hpasawng Township, but to date has been unable to do so due to inaccessibility. Thus, Pact hired an assessment team in March 2014 to access all remaining villages in the area to collect information necessary for expansion. According to the field assessment, there are 40 additional villages not included in official documentation. With this information, Pact is now planning to implement activities in all 73 known villages. Starting in the second quarter of FY 15, Pact plans to work with local backpack health worker team, Karenni Mobile Health Clinic (KnMHC), in order to reach and provide services in these 40 new hard-to-reach villages. As these 40 villages have not been previously served by the public health care system, the program will help to provide services to communities that have had little, if any, access to formal health care before.

During the year, Shae Thot conducted health system strengthening activities through advocacy and coordination with the respective departments of health in five townships. Activities included township-level advocacy in the township Continuous Medical Education meeting and cluster-level advocacy in Rural Health Centers (RHCs) and sub-centers. Township Medical Officers and basic health staff (BHS), including midwives, attended the meetings where Pact described the project's community-based activities, roles and responsibilities of Change Agents, referral services provided by the CAs, and coordination between the CAs and basic health staff. The advocacy meetings helped to facilitate better cooperation for community-based activities, reduced basic health staff resistance to



Midwives conduct EPI activities in Maw Chee Taung Por village, Hpasawng Township



A Shae Thot Township Manager gives a health talk at a township-level nutrition activity

collaboration with project CAs, and increased BHS participation in community events such as Baby-Weighing Days. This collaboration also led to opportunities for Shae Thot CAs to begin assisting midwives with immunizations, pregnancy registration and identification of underfive children. BHS showed willingness to engage in the village-level meeting and collaborated with CAs to help parents to complete the birth registration process for their under-one children free of charge. CAs and VDC are also linking with BHS by identify poor pregnant women in their communities, and informing RHCs so that these women can deliver in the hospital at a free or reduced rate.

Closing the Gap: Supplementing Community Action and the National Health Infrastructure with Mobile MCH Clinics

Shae Thot also uses a mobile clinic methodology, led by MSI, to augment access to health care and family planning facilities prioritizing hard-to-reach villages and villages not served by a midwife or AMW. Clients receive quality health services from qualified health professionals without any out-of-pocket payments, closing the gap between inaccessibility of services and barriers such as the inability of rural clients to afford transport and medical services. Regular access to maternal and child health services and health information through mobile clinics enables community members to develop improved health-seeking behaviors, which in turn positively affect maternal and child morbidity and mortality.

This year MSI added two new townships, Yenangyaung and Salin, to their coverage area, providing mobile clinic coverage to 753 villages in seven townships in the Dry Zone, serving a total of 37,624 clients (25,025 new and 12,599 existing) during the year, nearly 1.5 times more clients than in Year 2. MSI offers clinical services including antenatal care, postnatal care, newborn care, family planning services and health care to children under five through a combination of mobile clinic and health promotion sessions.

During the period, 146,029 people benefited from 15,202 interactive health education sessions on safe motherhood, family planning and child care. The number of community health sessions offered has continued to increase year after year, due both to program expansion into new coverage areas, and the increased interaction with, confidence in, and connection with community volunteer MCH Promoters in providing awareness sessions to communities. Community health sessions improve participants' knowledge of maternal and child health, increasing awareness of proper care and danger signs during pregnancy, delivery and the postnatal period, and detection of childhood illnesses, leading to increased health-seeking behaviors and more timely access to health services.



Clients take part in community health education sessions led by MSI

Addressing Barriers to Accessing Care

As mobile clinics provide a continuum of maternal and child health and family planning services to clients in their rural communities, mothers and children are able to avoid making multiple long and often costly trips to urban areas to access public care, saving time and money that can instead be spent on the welfare of their family.

All mobile clinic services are provided free of charge, further addressing affordability and transportation barriers, contributing to more timely updating of services, as well as increasing consistent, regular access for continued services.

A total of 6,924 pregnant women received antenatal care, of whom 391 women received tetanus toxoid (TT) injections through the clinics. Mobile clinic staff work in collaboration with basic health staff, providing TT injections to women in their second trimester who have not previously accessed TT injections through basic health providers. Staff also provided consultations for 13,378 cases of childhood illness, among whom 559 cases were for diarrhea in under-five children treated with oral rehydration solution (ORS), and 5,485 cases of acute respiratory infections (ARI), including pneumonia for under-five children.

A total of 15,103 clients accessed family planning services with 7,102 new clients receiving voluntary family planning services of their choice from a range of long- or short-term methods, and 8,001 existing clients returned for continued services. Family planning services offered through the mobile clinics increased accessibility for those in rural areas, preventing unintended pregnancies. Clients are counseled about the different long and short-term family planning methods available so that they make informed decisions and select an option that is best for them. Through family planning services provided by the mobile clinics, an estimated 3,273 unintended pregnancies and 879 abortions were averted. In additional, an estimated 207 maternal DALYs (disability adjusted life years) and 2,040 child DALYs were saved.

In rural areas, direct access to MCH services is limited in hard-to-reach areas. To fill gaps in health services in these areas, the Department of Health trains volunteer auxiliary midwives (AMWs), selected from under-served villages and trained for three months in the hospital and three months in the nearest rural health center. Midwives can effectively augment gaps for provision of lower-level MCH services in these hard-to-reach areas. Working under the supervision of midwives, AMWs provide antenatal care, routine referrals for at-risk mothers and newborns, postnatal care, and treatment for minor ailments. As most births in Myanmar occur in the home, MSI supports training of basic health staff and voluntary health workers through trainings for new auxiliary midwives and refresher trainings to others who would like to update their skills. During the year, MSI supported basic AMW training for 30 participants from Myingyan and Pale, as well as 217 refresher trainings in four townships for existing AMWs. Refresher trainings are especially important because many previously trained AMWs report significant periods of time since they last received formalized training. Regular refresher trainings ensure they stay up-to-date on their knowledge and skills, enabling them to more effectively assist with ante- and postnatal care, and improving their ability to recognize pregnancy, delivery and postnatal complications and make referrals to township medical facilities addressing the main causes of maternal and neonatal mortality.

Due to limited services in the public sector, community members still must often rely on private practitioners for health services. Thus, as Shae Thot seeks to improve the quality of



MSI-supported CME training in Magway Township



MSI-supported AMW training in Magway
Township

care available to communities, MSI supports continuing medical education (CME) for private general practitioners (GPs) at the township-level, in addition to public basic health staff. GPs are often the first contact and primary source of patient care for urban clients, while basic health staff serve as key points of direct care. During the year, MSI supported CME for a total of 123 health professionals, including 54 private GPs and 69 basic health staff. Enhancing the skills of both public and private medical professionals is also critical to supporting sustainable access to services in communities since, as Shae Thot ends and activities are withdrawn after the project period, community members may seek health services from both the public and private sector.

Results to Date: Local Partner Maternal and Child Health Project

Since January 2014, Shae Thot has partnered with Community Development Association (CDA) to augment and support public health systems, and to promote improved health knowledge and practices in hard-to-reach areas not currently served by Shae Thot in Meiktila Township, and Hpasawng Township, covering 50 and 20 villages respectively. Programming seeks to reduce MCH mortality, strengthen health behaviors and the status of pregnant women, improve childhood illness diagnosis, treatment and referral, and identify and train AMWs in collaboration with Township Health Departments to improve coverage.

A baseline survey was completed in August from 28 villages in Meiktila and 10 villages in Hpasawng, reflecting the communities' current levels of nutrition and MCH knowledge and practices and the accessibility of health services. The survey revealed that the majority of mothers of under-five children knew about exclusive breast-feeding, 70% in Hpasawng and 90% in Meiktila. However, few mothers, 10% in Hpasawng and 3% in Meiktila, knew of the three nutrition groups. Some mothers also had incorrect beliefs about feeding during diarrhea, although most continued feeding as normal. Results also showed that community members' knowledge of danger signs for pregnancy and delivery is quite low, with only 10% of pregnant women in Hpasawng and 3% of pregnant women in Meiktila able to identify at least three danger signs of pregnancy. None of the women in Hpasawng could identify three danger signs of delivery while 4% could in Meiktila.

Communities face many constraints and barriers to accessing care, especially in Hpasawng, which include; ignorance and lack of proper health knowledge, health centers, and facilities; communication and transportation barriers; and low coverage of MCH care services. Midwives are the main antenatal care providers, with more women receiving care in hospitals



Midwives participate in a Helping Baby Breathe training in Meiktila

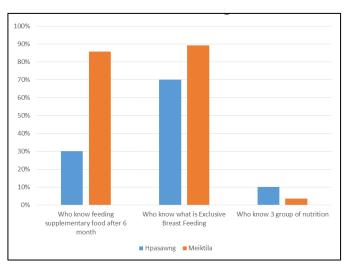


Figure 8: Baseline findings on nutrition knowledge in Hpasawng and Meiktila

in Hpasawng than Meiktila, likely due to access less expensive trained birth attendants and AMWs for the latter. In both townships combined, 84% of pregnant women received ANC from skilled medical personnel, but care was incomplete as only 54% received four antenatal care visits and only 47% received two doses of TT injections.

To date, project facilitators have provided 71 health education sessions in the 70 target villages to 1,920 participants (1,589 female, 331 male). Project facilitators increase community health knowledge, and either directly provide health care or connect communities with health staff, such as doctors, nurses, health assistants and midwives. Starting in September, AMW training was provided for 35 people (25 from Meiktila and 10 from Hpasawng). Thirty-three of the AMWs also participated in Helping Baby Breathe (HBB) Training, and all were provided with resuscitator kits and HBB handbooks. The training teaches midwives what to do when babies need help with breathing, which will reduce the death rate of newborns at birth.

LIVELIHOODS AND FOOD SECURITY

Overview: Ensuring that Ma Mya can sustainably generate an income to feed her family and support their needs guides Shae Thot's approach to improving household-level food security and increasing livelihoods opportunities. Through a dual approach, the program provides Ma Mya with access to financial services and improved agriculture practices. Ma Mya and her community members have options for accessing credit, including targeted provision of financial services through either institutional-based credit delivery or savings-based empowerment to support microenterprise development. For community members engaged in household-level agriculture production, Shae Thot provides key rural livelihoods inputs for community-managed agricultural diversification and intensification, including improved irrigation, improved small livestock management capabilities and seed-multiplication strategies. All financial service mechanisms and agricultural production activities enhance transparency and democratic processes, as village group members learn and practice good governance approaches to community fund and agricultural board management.

Results to Date: Provision of Credit Services

Institutional Financial Services

Pact Global Microfinance Fund (PGMF) improves the livelihoods and food security of rural and urban poor, marginal farmers and non-farmers through an approach that raises incomes through the provision of credit and savings-based financial services while promoting the resilience of rural households to disease, disasters and other shocks through a small-scale insurance program. PGMF increases economic access by providing members with access to credit provision services to undertake new income generating activities or expand existing activities, thereby raising individual and family income levels.

A total of **41,789 households** across 8 townships have **received microfinance** services for trading, livestock breeding, service enterprises, farming and healthcare. The total on-time client **loan repayment rate for the year is 100%**. To date, a total of **44,301** clients have joined the program; thus, at 60% of the way through the program, the number of households served has exceeded the program target (**34,200**) by 27%.

Ninety-nine percent of active borrowers this period used loans for income-generating activities, most popularly for trading (39%), livestock breeding (37%) and agriculture (11%), as detailed in Figure 9. Microfinance services, provided in the form of standard graduating





Top: A WORTH member at her shop

Right: A seed bank distribution



Summary of Key Results:

- 41,789 rural and urban households received microfinance services to date
- Microfinance Centers have been established in 1,140 communities across 8 townships to date
- 14,822 women from 565 savings groups benefitting from financial empowerment through the WORTH program
- Women have received a total of \$2,417,155 from 61,739 loans to invest in microenterprise and other income generation

loans, provide access to individuals who have either previously not been able to access credit, or have had to rely on high-interest loans from private money lenders, who often charge up to 20% interest monthly. Agriculture loans are provided to marginal and small farmers to buy essential production inputs for farming. The loans are based on the crop nature and harvesting period, with efforts made to introduce improved varieties of paddy and other food crops to increase client profit margins by obtaining higher yields. While the majority of credit activities are targeted at the middle to poor segments of the village, landless and very poor households can also receive a small amount of capital for small livestock investment.

Ninety-five percent of Shae Thot's microfinance beneficiaries are women, and for many this represents the first time they have been able to financially contribute towards their household income and not have to rely solely on their husband's earnings. For those who had previously earned an income, generally from micro-businesses, they commonly rely on financing from money lenders in the form of high-interest loans. A survey of 160 women taken by PGMF in December 2013 revealed a 70% decline in dependency on money lenders after joining the project, as well as a 50% increase in participating in household decision-making, especially related to their children's education and the household's social affairs. With smaller, low interest payments and increased investment, families have the opportunity to increase their incomes and become more secure. Further, women's increased decision-making suggests that their increased financial power has also generally expanded their household bargaining power.

Figure 10 outlines the portfolio growth for clients, both active (9,218) and new borrowers (12,655), over the year, with the total number of loans disbursed increased 95%, with 58,273 loans disbursed, while disbursement amounts increased 166%, adding \$7,230,8350 in loans dispersed. Over the year monthly savings rates have increased, with women saving a monthly total average of \$61,877, an average of \$1.40 each per month.

To improve client knowledge and success for enterprise development, PGMF has formed 1,140 Microfinance Centers (MFCs) across eight townships, with 326 new microfinance centers opened this year. MFCs democratically elect an executive committee, who then receive training on institutional development, record keeping and microfinance methodology, to oversee operations of the MFCs. A total of 2,698 non-formal business education trainings have been provided to clients prior to accessing credit, building competency in starting micro and small businesses and promoting the importance of savings practices, as well as the use of profit and the establishment of microfinance institutes.

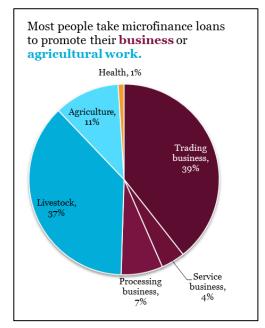


Figure 9: PGMF loan utilization

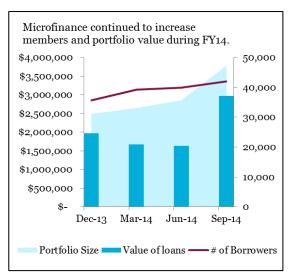


Figure 10: Microfinance portfolio

PGMF builds the resilience of poor, urban and rural households to better cope with incidents of disease, disaster or other catastrophes through a **Beneficiary Welfare Program** (BWP), which protects clients from carrying the burden of their debt in the event of an emergency. If unforeseen natural disaster destroys the borrowers' source of livelihood, they receive compensation based on the extent of their loss. The membership fee is a small (approximately 1% of the loan amount), one-time savings deposit per loan term. This amount is pooled with contributions from PGMF's interest income in a fund managed by the project. Currently the program has 41,789 participating members with a fund balance of \$138,406. During the year, a total of 129 beneficiary families received compensation for the death of the borrower, totaling \$9,627 through the program. An additional 99 beneficiaries have received a total of \$2,679 in response to disasters. A total of 119 loans, valuing \$8,309 have been written off due to these losses.

This year, the program also introduced cash assistance to borrowers for child delivery, providing three different levels of support. Members receive compensation to purchase Clean Delivery Kits and pay for either home delivery with a midwife, normal delivery in a clinic, rural health center or hospital, or caesarean delivery. Since 95% of PGMF clients are women, this new form of beneficiary assistance helps address the double economic strain of childbirth and the struggle to keep their business functioning to feed their families, while making loan payments to repay birth expenses. Not only do they have to take time away from their business for childbirth, but hospital, and even village midwives are relatively expensive. To date, 293 women have received child delivery support totaling \$14,739.

WORTH Savings-Led Empowerment

Pact's saving-led women's economic empowerment program, called WORTH, strengthens participants' ability to financially support themselves and their families by providing financial access through a savings-based group loan fund and increased livelihoods opportunities. In groups of about 20-25, women create savings groups, with each contributing a small investment to establish village banks. After participating in a self-learning series on financial literacy and entrepreneurial training, women begin to take out individual low-interest loans to begin or grow their own micro-enterprises. As members repay their loans, the interest generated helps grow the fund, increasing capital to be loaned out again to other members.

WORTH implemented activities in five townships this year; three townships concluded programming at the end of June, leaving two currently active. By the end of the project in 2016, WORTH aims to have increased financial access for 18,175 women. To date, a total of



A mother and newborn who received delivery support through the BWP



Business Management Skills Development mobile workshop in Seikphyu Township

18,407 women have participated in the program through 706 savings groups. So far, 684 of these have formed Management Committees to effectively manage the group funds and ensure sustainability. Women contribute savings on a weekly basis, and have collectively **contributed \$715,053 of their own funds, with no seed money** from the project. From their savings, the women have taken out 61,739 loans valuing \$2,417,155 to invest in either micro-enterprises or other income generating opportunities (Figure 11). Over the last year, **1,531 women**, 11% of total WORTH women, have **either established a new business or extended their business**, contributing to their household income.

By the end of the last quarter the total group fund was \$494,290, while the value of the **revolving loan fund**, which continuously grows, **increased by 24%** to \$1,799,582. The fund grows in two ways: through savings and interest. Savings are the more significant; in 2014, the total amount of savings from these groups increased by 22% to \$653,596, due to an increase both in the number of members and the amount of savings per member. The average savings per member is \$49. Members are incentivized to save above the minimum required amount in part because dividend payments, which are generally about 23% of their savings every six months, and women mainly

choose to re-invest these in the groups funds, The amount of interest generated from group loans is \$159,306. On average, each member can borrow over \$218, or over four times their savings, from their village bank to invest more capital in income generation activities to support their family needs.

Unlike a formal credit program, the WORTH model does not use an outside loan fund and is sustained entirely through the management and initiative of the participants themselves and the interest those funds generate. Each savings group is given a standard set of trainings to support group success, highlight transparency and democratic group principles and augment group trust. The trainings include:

- Introducing the idea of the savings groups;
- Forming management committees;
- Conducting group meetings and building strong groups;
- Learning the mechanics of saving;
- Providing loans;
- Keeping financial records.

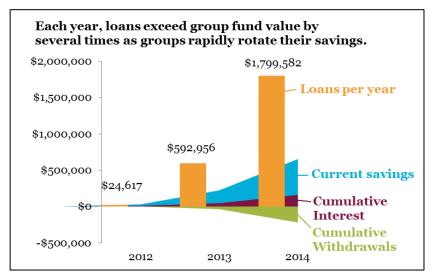


Figure 11: Status of WORTH group fund



WORTH members complete an exercise during a Sustainability Workshop in Seikphyu Township

A total of 10,713 women from 442 groups have participated in the WORTH trainings series. Of these, 1,752 women from 438 villages are part of Management Committees and have completed a four-day Management Committee training on record bookkeeping. After completing the trainings, 14,822 women, including 2,876 this year, have started saving and loaning. A total of 2,224 women from the three townships completing programming this year took part in four different mobile workshops, which groups took turns hosting and sending women to participate in. The groups included a market linkage workshop to help women accessing markets for their products, business management skills and sustainability and impact sharing workshops to promote networking, learning and sharing among group members.

In the three townships that phased out in 2014, Seikphyu, Myingyan, and Magway, WORTH conducted a quantitative impact survey with three women in each group to compare outcome-level changes between baseline and endline. The survey revealed that women's **monthly personal income had dramatically increased** since joining WORTH. At baseline, 7% of women did not have personal income, but at endline all women were generating their own income. Among women who did have income, a higher proportion were **earning over \$50 monthly** by endline, putting them above the international poverty line. Finally, more women were aware of their income, with women who don't know their income declining from 12% to 1%, a sign of financial ownership and literacy.

Women's participation in WORTH positively impacted their ability to contribute income to improve their living status. As seen in Figure 13, women significantly increased their use of solar energy and public electricity, and decreased dependence on kerosene, batteries and generators. Anecdotally, this change may be either due to their increased access to financial services to purchase electricity, or that their increase in

access to financial services to purchase electricity, or that their increase in income makes the higher cost of grid-provided electricity, which is \$300 per house, more affordable.

Results to Date: Food Security and Agriculture

Shae Thot also seeks to increase agricultural productivity for smallholder farmers through the adoption of effective, locally appropriate and environmentally sustainable agricultural techniques. CESVI promotes technology transfer to address low production and productivity using a range of delivery methods, including key farmers, farmer field schools and agricultural extension networks. After developing community action plans in coordination with the community and the VDC, key farmers participate in a

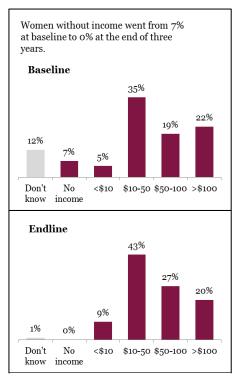


Figure 12: Women's change in income

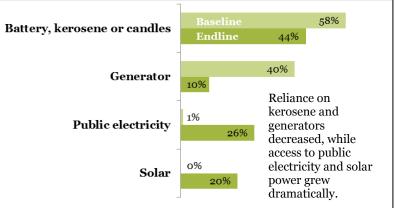


Figure 13: Changes in power source with increased income

training of trainers (TOT) on a wide variety of topics, including soil management, fertilizer, crop husbandry, seed technology, post-harvest technology, pest and disease control, soil conservation and cash crop production.

Expanded use of more effective agricultural techniques and inputs

During the quarter, program activities were conducted primarily in preparation of the 2014 monsoon agricultural season related to procurement and distribution of inputs and set-up of demonstration activities. CESVI carried out activities in 300 villages in six townships (Magway, Meiktila, Yenangyaung, Salin, Seikphyu and Pale) serving an estimated population of 195,366 people. Target communities in Magway Township have now been supported by the project for three years, a so the livelihoods component of the project will phase out during the first quarter of Year 4. An extension period is planned to carry out irrigation activities, which were delayed this year, to prepare VDC future development plans for the communities supported by currently functioning self-financing mechanisms.

Farmers disseminated technical knowledge among participants in Farmer Extension Groups (FEGs), which are led by key farmers, who have been selected by the target communities through the VDCs, to introduce new technologies across field demonstration plots so that farmers can see "first-hand" the potential improvements in yield with appropriate technologies such as improving major crops, increasing local seed production, weed control, agro-forestry and addressing problems of soil fertility. A total of 178 key farmers, of which 82 were newly trained this year, have been leading farmers in FEGs. A total of 6,998 famers (5,107 men, 1,891 women) participated in FEGs in 299 groups covering 300 villages. This year, 109 new groups were formed with the participation of 3,081 farmers (1650 male, 1,392 female). At FEGs, farmers meet regularly to share information and learn about new technologies and practices from key farmers in their area. FEGs focused on topics related to harvest and post-harvest technologies, seed quality and selection, pest and disease management practices, soil erosion and conservation agriculture practices, and comparative advantages and disadvantages of using chemical fertilizers. Farmers have reported that facilitating FEGs has increased their opportunities to meet and discuss challenges and to access IEC materials on technical guidelines for crop production, and some have expressed that they feel more confident in public discussions and in advocating for appropriate extension services from relevant line government departments. The participation of Department of Agriculture staff with educational initiatives for farmers facilitated stronger linkages with communities and government extension services.

Summary of Key Results:

- 700 resource-poor farmers have been supported by direct project provisions and through revolving seed banks
- Revolving livestock funds have yielded 50% growth rates, supporting 1,219 beneficiaries with new livestock inputs
- 4,606 farmers have increased knowledge of improved farming techniques through Farmers Field Schools
- Early harvest data reveal crop yields of 125% in sesame in Yenangyaung township



Yield comparison of demonstration plots

During the period, a total of 90 new Farmer Field Schools (FFSs) were established in target villages, with 2,404 farmers (1,827 men, 577 women) participating. An additional second cycle of FFSs, established during Year 2 and closed during harvest season, were reestablished at the request of farmers interested in the methodology. To date, a total of 201 schools are in operation, serving 4,606 farmers (3,685 men, 920 women) and covering a total area of approximately 34 hectares of land under trial. FFSs aim to increase the capacity of groups of famers to test new technologies in their own fields, assess results and relevance for certain circumstances, and interact on a more demand-driven basis with researchers and extension workers when assistance is needed. FFSs are based on either major crops or technology management, and subjects include different crop variety trials, application of different types and dosage of soil fertilizers, integrated pest management techniques and comparison of different agriculture practices. FFSs are held in the community where farmers live, so that they can easily attend weekly sessions and keep up with regular studies. Figure 14 outlines the interrelationships among the different stakeholders in the Farmer Field Schools. Accomplishments include:

- 178 Key farmers are trained
- 2,543 of farmers received technical transfer
- 109 Farmer Extension Group formed
- 90 Farmer Field Schools formed
- 2,404 farmers participated in FFS

On-farm demonstration plots offer another opportunity for farmers to further their knowledge of new and improved agriculture practices. A total of 40 on-farm demonstration

plots were established during Year 3, covering an area of 15.5 hectares. The primary technical area covered by field study through on-farm "demo plots" this year was appropriate techniques for soil and water conservation measures. A total of 99 farmers participated, implementing the field demonstrations. These plots will serve as a starting point for interested farmers to replicate these measures to conserve soil for protection against soil erosion, which negatively impacts crop productivity. Most plots showed encouraging results such as increase in organic matter in the soil as a result of these measures. For demonstration sesame plots expenses were \$7 more per acre, while revenue increased \$259, resulting in a 168% return on investment. By the end of the year, a total of 500 hectares were under soil and water conservation measures in the

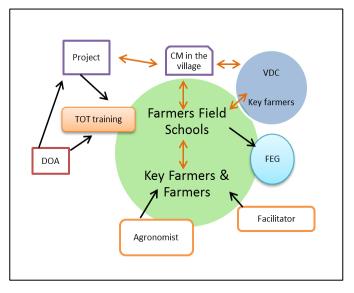


Figure 14: The interrelations of stakeholders participating in Farmer Field Schools

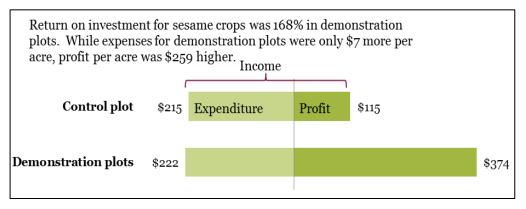


Figure 15: Return on investment from demonstration plots

project area with the participation of 473 farmers. Eighteen agroforestry crops were established this year, along with 10 during Year 2, covering an area of 10 hectares. Agroforestry plots involve planting annual crops intercropped among trees so that beneficiaries can earn income from the annual crops while the trees are growing, benefitting the soil structure and reducing wind soil erosion.

In total, on-farm demonstration and on-farm trials, together with soil and water conservation structures, contributed to impacting a total of **700 hectares of land under the project's soil fertility program** for Year 3, promoting composting and organic fertilization, in combination with chemical fertilizers. The works carried out by the conservation structures employed cash-for-work schemes, targeting most vulnerable households, designed to provide secure income over the dry season, when farmers often migrate away from the Dry Zone.

Increasing Yields through Seed Multiplication Mechanisms

The seed multiplication program aims to increase access to quality seeds among farmers and improved seed multiplication farm practices for long-term multiplication at the community level. The program is devoted to forming a network of highly qualified famers specialized in local production and dissemination of seeds by raising awareness of the benefits of high-quality seeds, while promoting experience-sharing among farmers identified as seed growers. For Year 3, a total of 116 new seed growers (109 men, 7 women) joined the program, receiving training and inputs to start up new seed multiplication activities in six townships. In total, 144 seed growers were trained and exposed to seed multiplication techniques, initiating a networking process to increase the availability of high-quality seeds in the target area. Forty-five seed multiplication plots, covering an area of about 19 hectares, were established in these six townships to produce certified quality seeds of main crops in the area. As of September, most crops were still in the field and will be harvested in the first month on the new year. Data from initial harvests in some townships have shown the potential of increased production of seed multiplication plots.

A total of 5,509 resource-poor farmers, including 2,332 for Year 3, have received seeds distributed through the respective seed bank committees and fertilizer distribution. Each VDC established a seed procurement group to work closely with project technical staff in seed selection, provision of contract farmers and distribution. As part of beneficiary accountability, farmers are informed of seed quality and certification, and are invited to perform germination tests on the seeds distributed. An estimated **3,168 acres (1,282 hectares) is currently under cultivation with project seed** provision for the current agricultural season. New beneficiaries of seed distribution will join the seed bank systems

A Closer Look at Farmer Field Schools

FFSs are organized for groups of 20-25 people with common interests who can support each other, both through their individual experiences and strengths, and by creating a "critical mass". As an individual, trying new approaches can often be viewed as inappropriate (i.e. reducing sprays or covering crops), but in a support group, these new techniques become socially acceptable. The groups of 25 are generally broken out into groups of 5 persons each, so that members can better participate in field observations, analysis and discussions, gaining the support of fellow farmers.

FSSs equip farmers with knowledge and skills to enable them to make their own informed decisions about their crop production. Farmers are taught to analyze crop characteristics, and to conduct participatory analyses of costs versus benefits of the activities undertaken, comparing them with their traditional cultivation practices.

FFSs represent a significant step forward in agriculture education and extension in Myanmar, promoting exploration, discovery and adaptation under local conditions. Schools are not only founded on sound science and technological methods, but are also designed according to local ecological, social, economic and historic contexts. They emphasize participation from all stakeholders, each taking ownership of the process.

already put in place in order to contribute to the revolving fund of each community. During the Year, 10,562 farmers directly benefited from the seed banks and while an additional 4,708 poor-resource farmers benefitted from secondary seeds distributed by the banks, without direct project support. Currently, 43% of beneficiaries have repaid their seed bank loans, replenishing 74% of stock on loan. The remaining beneficiaries will pay back their loans by the end of the current agriculture season, between December and January. Seed bank mechanisms continue to be highly successful, and most beneficiaries have identified them as a primary way their community has benefited from the project, due to the availability of seeds, the relevance in timing for the cropping season and the convenient repayment schedule.

The project has also supported the set-up of 30 seed stores located in cluster locations among the six target townships, and to date, 24 have completed construction. The seed stores will improve the opportunity for proper storage and reduce post-harvest losses due to improper storage practices. Communities contributed to the provision of unskilled and skilled laborers, and some locally available materials.

Alternative Support for Landless Citizens

Shae Thot supports landless citizens through a small livestock program. A total of 57 new Animal Health Workers have received initial training and 51 previously trained Animal Health Workers have continued to receive refresher trainings and delivered extension messages to livestock beneficiaries. A total of 283 trained Animal Health Workers assist an average of 100 households with livestock owners per health worker. During the year, a total of 18,060 community members (11,676 men, 6,384 women) from six townships were assisted by Animal Health Workers trained by the project, with the delivery of first-aid treatment and messaging related to animal health and husbandry. As most small livestock problems in the area are related to incidence of disease in rural communities not accessible to animal health services, AHWs provide an important role in supporting proper livestock management and minimizing disease and death.

Shae Thot has also established revolving livestock funds, through which beneficiaries receive start-up stock of pigs and goats. To date, 264 animal banks have been established supporting 1,219 beneficiaries. During the year, a total of 665 new animals were distributed to 643 beneficiaries. To date, a total of 2,094 animals from the initial of 1,399 have been distributed, representing **a 50% increase**. Similarly, the number of beneficiaries receiving the livestock has increased from 717 to 1,175. Half of the newborn stock is maintained by the initial beneficiaries for income generating opportunities, while the remaining half is

Demonstration sesame plots with improved seeds and farming techniques yielded 10.6 baskets per acre, compared to a 5.5 yield on a control plot. This represents a 93% yield increase.

Control sesame plot

Demonstration sesame

Figure 16: Yield increase from demo plots

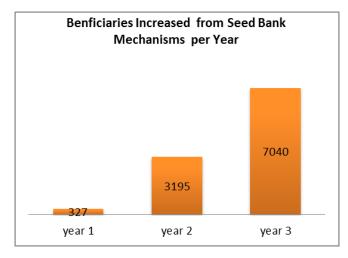


Figure 17: Increase in seed bank beneficiaries

distributed to secondary beneficiaries. Given the low start-up and maintenance costs, and rapid turn-over, revolving livestock funds are a viable activity for landless citizens. Once beneficiaries have repaid the livestock bank through an offspring of their "loaned" animal, they are then able to sell any new offspring as additional income. This income earning potential is significant, with beneficiaries receiving an average of \$200-250 per pig, an equivalent of up to **five months of household food expenditures, greatly increases household food security**, especially during lean months.

Complementary crops also provide important food security support, especially for landless citizens, and vegetable gardening has proven to be a good option, easily applied to a small area of land by both men and women. During the year, home garden kits with an assortment of vegetable seeds and fruit tree seedlings and tools were distributed to 850 vulnerable households in six townships. Beneficiaries were selected in coordination with Pact, prioritizing pregnant women or those with children. Home gardening activities will contribute to improved nutritional status, as well as diet diversity, while also providing an alternate source of income for vulnerable households. About 65% of home gardening beneficiaries from Year 2 are now planting vegetable seeds saved from this agricultural season, and consider vegetable gardening a viable way to create additional income.

Performance of vegetable production has recorded successful results, providing supplemental income for most vulnerable households. On average, households were able to **earn an additional \$80-\$100 per cropping season**. Given low start-up costs, the beneficiaries' **returns on investment were from 68% to 216%** per household. Average monthly income of these households is \$100-\$150, with food expenses accounting for \$60-\$80 a month; the extra side income can be used for other expenditures such as health and education.

Results to Date: Local Partner Livelihoods and Food Security Projects

Shae Thot engages three community partners in Central Burma and Kayah State to provide livelihoods and food security support through a variety of locally driven interventions that seek to promote improved agriculture practices, strengthen market linkages and build community and CBO capacities. Partners utilize community engagement techniques such as community planning approaches,



An animal health worker provides assistance to a beneficiary

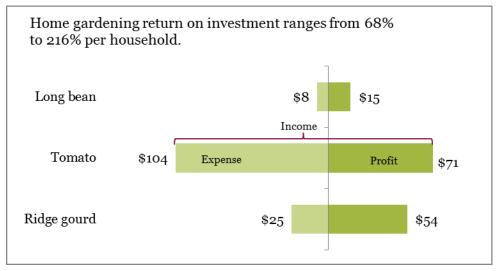


Figure 18: Returns on investment for home gardening

formation of community groups and Village Development Committees, and interactive educational trainings, workshops and field visits. Emphasis is placed on sustainability and empowerment to build community resilience for livelihoods and food security.

Swanyee Development Foundation (SDF)

SDF seeks to increase livelihood security for vulnerable households while strengthening the organizational capacity of CBOs to implement sustainable livelihoods programs and equip them to promote development and social protection in their villages. The project is working in 20 villages from 18 village tracts in Aunglan Township, serving 5,200 households.

In each village, activities have focused on strengthening VDCs and sub-groups for agriculture, livestock and women's empowerment and conducting basic livestock raising training. Programming has been initiated in all 20 villages, starting with a needs assessment and technical survey and followed by a series of trainings to develop technical and organizational capacities. All villages took part in the VDC training, learning about organizational and leadership development, financial management, community action planning and small business development. A compost-making training was facilitated for 500 agriculture working group members (286 male, 214 female) from the 20 villages. Communities received technical training, completed community action plans for compost construction and provided compost making support materials. All villages have now undertaken compost making in their villages. Another 500 selected agriculture working group members (245 male, 255 female) also completed training on the agriculture revolving fund, which concluded with community action plans being drawn. Twenty villages received a three-day livestock extension-worker training. A management training on livestock input revolving fund was facilitated for 500 individuals including selected beneficiaries and livestock working group members, nominating one participant per village to serve as a working group leader.

Lastly, five targeted villages established community seed banks. According to agriculture working group proposals, SDF distributed inputs of local quality seeds to each village, in coordination with Myanmar Agriculture Service, in Aunglan Township. Groundnut was distributed in three of the villages, and green gram was provided in the other two.

SDF implements activities according to the project design "triangle approach," through the three working groups: Agriculture, Livestock and Income Generation, which are each comprised of 25 members. During an initial round of provision of agriculture, livestock and seed inputs were distributed through revolving fund mechanisms, prioritizing the poorest

Promoting Change, Farmer to Farmer

Many farmers come from a long tradition of farming, employing methods and practices that have been passed down from generation to generation. Often these farmers are either unaware, or do not believe in, the benefits of improved technology, and resistance to change runs high. Demonstration plots provide an important way to address these barriers by enabling farmers to see first-hand the benefits these new practices bring, and also by allowing them to learn from fellow, trusted farmers from their communities, further reinforcing the tangible benefits of these changes can bring. Farmers are able to observe how new technology can increase their yields, and how new crop varietals can grow in their land and soil type. Farmers also improve their awareness of market demand crops.

Demonstration plots have been highly successful in communities. More and more farmers are participating and sharing their experiences with others, and adoption of these new technologies is increasing, with farmers beginning to seek out other ways to integrate improved technology into other agriculture practices as well.

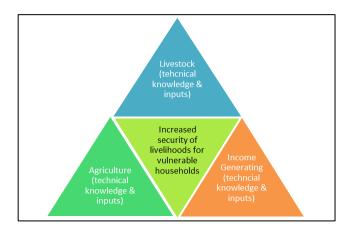
and most vulnerable households. In future rounds, additional community members will be able to access the funds, according to the rank of their priority plan and list. The VDC manages the three sub-groups, playing a vital role in sustaining and growing the inputs in the village revolving systems.

Kayhtoeboe Social Development Association (KSDA)

KSDA is working to fulfill food sufficiency of households, educate farmers on market demand and approaches, and build the capacity of VDCs, serving 4,174 individuals in 863 households from 15 villages in Bawlakhe Township. The project has established rice banks in all 15 villages through community support and participation. In Bawlakhe, most villages grow sesame, corn and pea crops, but not rice paddy, meaning that villagers must instead purchase or exchange products for rice for their consumption. Community members made contributions for the banks and KSDA provided physical materials and labor for construction. A rice bank committee has been established in each village, with 83 total members (54 males, 29 females) having completed rice bank mechanism trainings to learn proper operation. With project guidance, committees then adopted their own rice bank bylaws, which were approved by the village.

Food insufficiency in these villages is a common occurrence due to difficult transportation, high local market price for rice, and not enough income. Even though the exchange of rice with their farm product is not easy, farmers are able to do so, but lose potential income through the exchange as their products are of a higher value than the rice, but they don't receive compensation adjusted for the difference. The rice banks provide an alternative; communities can store surplus rice for distribution to communities, using a systematic revolving rice bank scheme, which promotes sustainable operation, so that villages are better equipped to address food insecurity in the future.

A beneficiary vulnerability survey revealed that communities most needed project support through provision of farm tools, seeds and small livestock. For raising livestock, the agricultural and livestock committee procured a local breed of pigs, which are the most suitable due to the climate conditions and transportation barriers. Families received information and tools and were able to increase their workforce, completing work more quickly and earn profit more timely. In total, 562 households received agriculture tools for farming activities, 17 households received quality seed distribution and 149 households received pigs.



SDF's triangle approach for household-level food security



Participants practice new techniques at Farmer Field School in Bawlakhe Township

The project also supports the establishment of farmer field schools (FFSs) to encourage sharing and participation between farmers and communities. Each village selected two representatives to attend FFSs, where they met three times per month to share knowledge about systematic crop cultivation. Participants learn how to grow maize, sesame, bean and groundnut, which are grown in demonstration plots. Villages in the area tend to grow sesame only. The schools help encourage learning about key development concepts, sector strengths and weaknesses and sustainability. The project has also introduced FFSs to each village, with two selected representatives from each attending the schools to learn about growing different types of crops. Eight demonstration plots have been set up to enable farmers to view techniques first-hand. The demonstration plots have shown farmers the benefits of improved crop varieties and have proved especially successful in promoting the benefits of monsoon-season cropping, when farmers are especially susceptible to poor weather and decreased crop yields. FFS trainings were conducted through collaboration with the Bawlakhe Township Agriculture, Livestock and Forestry Department. Farmers have received trainings on agriculture and livestock, home gardening and agro-forestry.

A total of 96 community farmers benefitted from a workshop on supply and demand, focused on direct linkages with traders and the market, so that they can better select crops in advance. The workshop helps educate farmers on marketing, so that they can thoughtfully plan for profit in running their farms.

Rural Development Agency (RDA)

RDA is implementing activities to improve household food security by increasing food production and household income in 25 villages in Hpasawng Township. A baseline survey has been conducted in all 25 villages, including 176 households. Each village has formed an agriculture, livestock and livelihoods sub-group, composed of three community members, including a lead VDC member to facilitate linkages with the VDC. Women account for 44% (33 members) representation in the sub-groups.

To help farmers learn and share technology and practices, 11 villages have established 24 varietal farmer demonstration plots, where selected farmers learn and share technology through farmer extension. Through 22 marketable crop demonstration plots in 16 villages, RDA has introduced non-traditional crops, such as pigeon pea, corn and soy bean, which have the potential to be valuable marketable crops, promoting crop productivity and improving household income. As communities in Hpasawng typically only grow sesame, the program has taught farmers about intercropping and alternate cropping rather than solely cultivating one crop. This enables farmers to increase yields while reducing their

Promoting Agricultural Awareness and Linkages

In September, the project hosted an agri fair event in Pale Township in which over 500 people from the six CESVI Shae Thot target townships participated, including VDC members from 300 villages, farmers, township and regional authorities, private companies, civil society and school children. The agri fair presented the different agricultural activities implemented under Shae Thot, promoting improved cropping amongst agriculture service practices providers and raising awareness environment preservation and climate change. Villagers, private companies and authorities shared information about agricultural and livestock production, while VDC members and project staff conducted interactive discussions with lectures and experts.

The agri fair provided an opportunity for the various stakeholders to share experiences, best practices and lessons learned from the project. The fair was also an important opportunity for networking amongst the 500 participants, providing opportunities for collaboration and promoting linkages that can support sustainable agriculture practices beyond the project.

dependence on a single crop, improving their resilience and sustainability in the event a crop variety may have a low yield season.

In response to communities' identified needs, the project distributed seeds for farming and home gardening use, assisting a total of 667 households from the 25 villages. Community representatives participated in the purchase of the seeds with a VDC agriculture sub-group member verifying their quality and then assisting with the distribution to beneficiaries. Seed distribution aims to increase crop production by improving the variety and quality of seeds available to farmers, and offers a sustainable form of assistance – through seed multiplication farmers can then use the seeds for the following year. The project also distributed eight types of vegetable seed for households to grow vegetable gardens either in their communities or in their upland farm, improving household food security both by the amount and variety of food available for home consumption, and providing an alternate source of income by selling in the market. This activity also offers the opportunity for linkages with the village health and nutrition sub-groups to promote better nutritional consumption for mothers and children.

RDA facilitated technical trainings in all 25 communities to promote knowledge among communities. Several trainings were facilitated in collaboration with township authorities, strengthening farmers' technical knowledge, promoting linkages between communities and local agriculture and livestock authorizes. Seventy-four community members (52 male, 22 female) learned how to identify potential marketable crops and livestock through a workshop attended by the Hpasawng Township Administrator and the Head of the Agriculture Department and Head of Livestock Breeding Department. Both these officials each led sessions on how to identify crops and livestock. Sixty-six farmers (44 male, 22 female) also received technical training on sesame cultivation with soil conservation and intercropping. RDA facilitated a seed plot demonstration, improving farmers' technical knowledge on sesame cultivation intercropping and providing the opportunity to network with the Township Agriculture Department.



Agriculture technical training

Results to Date: Sustainable Health Improvement and Empowerment Project

This year, Shae Thot initiated a partnership with Pact's Sustainable Health Improvement and Empowerment Project (SHINE), funded by Chevron/Unocal, forming a public-private partnership (PPP) between USAID, Chevron/Unocal and Pact. SHINE implements maternal, newborn and child health, tuberculosis (TB), and water and sanitation activities in three townships in the Dry Zone, serving approximately 150,000 beneficiaries. Through the partnership, Shae Thot is supporting SHINE to implement women's empowerment (WORTH) saving and loan activities in 235 villages in Pyin Oo Lwin and Madaya Townships, providing alternative financial resources for 5,600 target women.

SHINE Empowerment Workers and staff participated in a five-day WORTH launch, learning WORTH program methodology and activities. Prior to entering the village and beginning workshops, Pact staff visited the village authority, elders and ten-household heads, to explain the program, set a date for initial workshops and to gain commitment at the township authority level. In each workshop, at least two-thirds of the households must participate to produce community-wide action plans and community-level impact. Once each community understands the program design and commitments of all parties, the community commits to the program, beginning with a series of workshops and trainings.

In March 2014, M&E staff visited township offices to deliver baseline survey collection training, using mobile phone technology, to gather information about each community regarding exposure to health education and health practices. The baseline survey revealed that most community members had not heard any health education messages in the past year and only 1.7% of respondents had heard health messages from NGOs. Although most target areas had heard of SHINE's target diseases, the level of knowledge of the cause, prevention and treatment of these diseases was much lower. Though many people knew how to prevent diarrhea and malaria, self-reported hand-washing practices and bed-net use did not correspond to preventative behaviors.

Since beginning the program, 188 new communities have participated in the founding Initiative and Social Development workshop and 144 have completed the Community Health and Development workshop. The Training of Trainers for VHDF Management Training was conducted in Pyin Oo Lwin and Madaya townships and 13 communities received Fund Management Training. WORTH Trainers completed two TOT induction workshops, learning how to train project empowerment workers.



A community-based training exercise

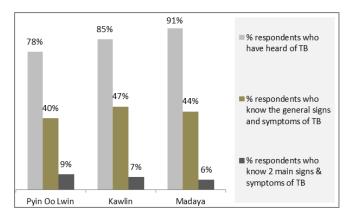


Figure 19: Baseline survey results on community health exposure

WATER, SANITATION AND HYGIENE

Overview: Shae Thot's community-driven model engages Ma Mya and her fellow villagers in activities to increase access to sufficient quantities of safe water and sanitation facilities and improve hygiene practices in their communities. Through a community action planning process, communities identify village-level priorities around water and sanitation and create initiatives to facilitate infrastructure improvement and installation. Community education workshops build knowledge and promote good hygiene practices.

Shae Thot transfers and develops skills via hands-on training and community-designed approaches. Infrastructure projects leverage community resources and engagement while promoting local planning and implementation of community needs and priorities. Hygiene education and promotion activities raise awareness and actively engage communities in the behavior-change process.

Results to Date: Community Management of Water and Sanitation Infrastructure

Shae Thot partner UN-Habitat leads water and sanitation activities in Central Burma, promoting low-cost, low-technology solutions that utilize community expertise and resources and help ensure sustainability. Infrastructure improvements prioritize training local carpenters, masons and artisans, and developing local expertise, obtaining locally sourced materials whenever possible.

Activities are initiated through UN-Habitat's "People's Process," a community-driven action planning process in which communities identify their needs and then develop contracts to implement activities based on those self-assessed needs. These community contracts reflect each community's proposed activities and budget and provide the basis for a plan of action together with the VDC or Village Water Committee (VWC), which takes the lead in ensuring a transparent contracting process. The process helps to improve local skills and expertise, while fostering a sense of ownership among community members and enhancing village capacities. Community grants administered through a village water sub-committee play a central organizing role in this process, through which communities and groups of households are eligible to develop joint plans for constructing deep-tube or hand-dug wells, mini-dams, access roads, sanitation for community schools or other types of water and sanitation infrastructure.

During Year 3, UN-Habitat initiated activities in 191 villages across three townships in





Top: A bio-sand filter in use

Right: A household latrine



Summary of Key Results:

- 135,158 people have improved access to safe drinking water
- 11,542 people using an improved sanitation facility
- 1,159 people from VWCs received technical training
- 191 Community Action Plans developed in target townships
- 3,317 bio-sand filters distributed for household-level water treatment

Sagaing Region; 60 villages each in Monywa and Pale townships, and 71 villages in Budalin, reaching a total of 135,158 beneficiaries (63,974 male, 71,284 female) in 28,350 households. Budalin and Monywa Townships concluded programming at the end of Year 3, completing an exit strategy to support sustainable village-level water and sanitation infrastructure management.

In Year 3, water supply construction efforts focused primarily on household-level water collection and treatment systems. A total of 3,799 household rainwater harvesting cisterns/gutters and 3,317 household bio-sand filters were built so that families can collect and safely store water at the household. Bio-sand filters offer an important option to communities that depend on ponds and dug wells for water, as they are very effective in removing bacteria, viruses, protozoa and turbidity in water, reducing water-borne diseases. The project educates communities about these advantages and proper use of the bio-sand filters.

At the community level, a total of 115 rain water collection tanks (RWCTs) with storage capacities of 3,000 and 5,000 gallons were completed in the three townships. Communities mobilized to support the effort, contributing labor and a portion of wages saved to a common community revolving fund for water system operation and maintenance to support sustainability. Ponds were renovated and constructed in 21 villages, with filtration systems and hand pumps installed for safe water fetching to be used for drinking and domestic water purposes. Additional construction efforts to increase community-level water access included constructing deep-tube wells with solar-powered or diesel engines, 14 renovated hand-dug wells, 12 newly constructed hand-dug wells and 13 shallow-tube wells, all of which were completed through active community participation.

Gravity flow water systems (GFWS) were installed in 29 villages in response to a field survey assessment and community needs. UN-Habitat technical staff supported communities with construction and the project provided the engine, compressor and main water tap, while communities contributed the meter system and branch pipe lines to the individual homes. These construction projects are highly valued as they not only reduce time required for fetching water from a hand-dug well, but allow more time to devote to other activities.

UN-Habitat's technical staff conduct training and skills development activities to promote construction work, as well as operations and maintenance with management and monitoring. This year, 98% (680) of the 693 planned training sessions have been

Benefits of Improving Water Access

Shae Thot aims not only to improve access to sufficient quantities of potable water, but also to reduce the amount of time required for fetching water for both drinking and domestic purposes. Women and children are primarily responsible for this task and often must walk considerable distances outside of their villages each day in search of clean water. During the dry season, as ponds and lakes dry up, they are forced to walk even farther. With projectfacilitated accessible water in their villages, they are relieved from the physical toll of water fetching and have more time each day for other tasks. This means mothers have more time for caring for the families, and children can devote more time to education and leisure.



Bio-sand filter training in Poe Kone village at Budalin Township

completed. Training sessions have focused on community-action planning (CAP), artisan trainings, VDC committee training, water quality testing, operation and maintenance training and bio-sand filter use awareness. A total of 191 villages have completed community-action planning and VDC Committee Trainings and established Village Water Committees.

In UN-Habitat villages, sanitation improvements have focused on construction of fly-proof latrines (FPLs) through community participation, with 100% of the 2,043 planned latrines constructed. FPL trainings promote optimum use of water supply and sanitation facilities while increasing knowledge and awareness for their continuous operations. Hygiene education sessions were provided to communities to increase knowledge on good hygiene practices and the benefits of proper sanitation. The project provided latrines to the poorest and second poorest families in each community, while hygiene education sessions encouraged others to build latrines at their own expense. UN-Habitat also prioritized improving school sanitation facilities, encouraging project villages to construct latrine units at schools to help reduce the prevalence of disease and help students practice better hygiene. Seventeen school latrine facilities were constructed across the three townships. Improved sanitation helps reduce the prevalence of disease and infection and the incidence of diarrhea among children. Improvement of school sanitation positively affects the physical and psychological well-being of children, especially girls, not only reducing the incidence of disease, but creating a better, safer learning environment.

One village in Monywa Township also facilitated cleaning for environmental improvement, through drainage construction to reduce soil erosion from water run-off and avoid water-logged areas, which foster mosquito breeding, contributing to the prevalence of dengue hemorrhagic fever. A total of 677 individuals (340 male, 377 female) benefitted from this activity.

Results to Date: Local Partner Hygiene Promotion & Water Infrastructure Management

Starting in January 2014, Shae Thot began working through local partner organizations to offer WASH activities that prioritize community-led hygiene awareness and education. In Central Myanmar, two local organizations, Social Vision Services (SVS) and Thirst Aid, are now serving areas not previously covered by Shae Thot programming. In Kayah State, Karuna Myanmar Social Services (KMSS) is leading activities in water infrastructure improvements and hygiene promotion.



Gravity flow water supply in Oe Kone Village, Monywa Township



Deep tube well with submersible pump in Pale Township

Social Vision Services (SVS)

SVS is implementing hygiene promotion awareness using the "4-Clean" methodology, which teaches "clean water, clean hands, clean food and clean latrines," and safe water management. The project will ultimately work in 60 villages in Monywa Township and 85 villages in Pakokku Township in Central Myanmar, serving 25,017 households and a total population of 118,041. To date, the project has initiated hygiene activities in 46 villages in Monywa and 62 villages in Pakokku, leading a social mobilization workshop and 4-Clean awareness trainings serving three groups: mothers and children, school teachers and students, and communities. The project also trains community members and teachers to serve as WASH promoters and to date has trained 186 community members, including 78 in Monywa and 108 in Pakokku and 144 total teacher WASH Promoters.

IEC materials have been distributed in all participating villages. Communities have received trainings on bio-sand filter use and villages have also committed to using bio-sand filters and constructing latrines in all households within one month of completing trainings. Most villagers understand the benefits of using bio-sand filters and the importance of hygiene.

Thirst Aid

Thirst Aid is implementing safe water and hygiene promotion activities in 18 target villages in Magway, Central Burma. Shae Thot has been implementing agricultural programming through CESVI in these communities, but all prior water activities have focused on irrigation and drinking water for animals, not increasing access to water for community consumption. The project will work through existing VDCs established under CESVI programming, through the formation of a community-selected WASH subcommittee. Project activities have commenced in nine villages, with a series of educational and awareness trainings for WASH committee members, including sections on a child-centered approach, social mobilization and 4-Clean water and sanitation. Beginning in August, 4-Clean campaign activities were launched at the community level in nine villages, with activities ranging from demonstrations and competitions for hand washing, safe water and hygiene educational talks and distribution of educational materials.

A baseline survey conducted through mobile data collection in June revealed that households treat water before drinking by boiling (11%), filtering (95%) and sedimentation (64%). Most households used a combination of two or three methods at once. While 79% of households have a latrine, only 11% have a fly-proof latrine. Ninety-eight percent of households have water available for hand-washing at the latrine, but only 48% had



School latrine with hand-washing facility constructed in Pale Township



Learning proper hand washing in a hygiene promotion workshop

knowledge on proper hand-washing practice. IEC materials have been distributed in all participating villages.

Karuna Myanmar Social Services (KMSS)

In Kayah State, Karuna Myanmar Social Services implements water infrastructure construction and hygiene awareness in four villages in Bawlakhe Township and 11 villages in Hpasawng Township, serving a total population of 5,547 individuals (2,816 men, 2,731 women). Program activities have commenced in all 15 villages, including community sensitization, the formation or reactivation of Water and Sanitation Committees (WSCs), and the drawing and design of water systems. Four community facilitator staff members and 15 volunteers in Hpasawng Township received hygiene training of trainers, and government health staff assisted in facilitating topics such as 4-Clean, personal and sanitary hygiene, nutrition, diarrhea and malaria. Upon completion of the training, the newly trained staff and volunteers conducted hygiene workshops in 15 villages for 478 participants (176 male, 302 female) and distributed sanitary materials. Hygiene kits have been distributed to 664 households, 45 primary and middle schools, seven daycare centers and four village health centers.

Feasibility studies were conducted on water supplies of gravity flow systems in six villages and infrastructure construction has commenced in two villages through collaboration with VDCs. Construction will include water collection tank construction and pipeline renovations in six villages, water filter and pipeline renovation in two villages, and the possible construction of a river-water pumping system or tube well in one additional village. Following an awareness session on seasonal communicable diseases related to unhygienic latrine usage, communities have contributed labor for the construction of model latrines for community use in 15 villages. The project has also supplied households with latrine supplies, a pan and a pipe to construct their own individual units. To date, 360 households have received the supplies, with 91 completing construction. An additional 40 households will receive latrine materials over the next quarter and all households will complete their own construction over the next fiscal year.

A baseline survey was taken from 302 of the 1,058 households in the 15 villages, and revealed that 25% of households had access to protected drinking water sources year round, and 75% of those rely on surface water and unprotected spring water and spend nearly an hour each day fetching water during the summer and winter. Only 55% of households reported properly sterilizing their water. While the majority of households reported owning an improved toilet, 30% of those were not built systematically. Sixty-five percent of households reported following appropriate hand-washing techniques.



Measuring a gravity flow system



A project-supported household latrine

URBAN RESPONSE TO POVERTY AND ILL HEALTH: SHAE THOT URBAN PROGRAM

Overview: Shae Thot's urban program is a reflection of Ma Mya's life; her needs and desires to achieve a healthy, financially-secure existence for herself and her family are not separate, isolated requisites, but instead a collection of interdependences that either advance or impede her well-being. Therefore, Shae Thot's urban program offers integrated interventions that enable Ma Mya and her neighbors to holistically receive support for improved health care, hygiene, nutrition and economic security.

Urban poverty is not just a collection of characteristics, but rather a dynamic condition of vulnerability and susceptibility to risks, such as limited access to employment opportunities and income, inadequate and insecure housing services, unhealthy environments with insufficient social protection and limited access to adequate health and education opportunities. Since 2012, Shae Thot has been implementing a program in Shwepyithar Township, a peri-urban area of Rangoon, to address issues underlying poverty. The area is home to a quarter million people who live within 22.5 square miles, and lack access to sufficient, safe water sources, proper sanitation and adequate housing. The majority of the population works as casual day laborers, often plagued by a cycle of debt and dependency on money-lenders. Residents have little or no social protection, and have limited access to adequate health care, clean water and education opportunities, leaving them vulnerable to disasters and prone to diseases from poor health and sanitation.

Shae Thot is addressing the health, water and sanitation needs in the area, through an integrated approach that aims to increase knowledge and awareness of good health and sanitation, infrastructure upgrades to improve access to water and sanitation, and extending accessible credit for livelihood generation activities. Efforts are supported and enforced through the establishment of VDCs, which focus on addressing problems among high-need populations. By the end of Year 3, both Pact MCH and UN-Habitat completed programming in Shwepyithar.

MSI provides mobile clinic services for ante- and post-natal care, newborn care, family planning services and treatment for childhood diseases. Community volunteers are trained as MCH volunteers, and community education sessions are conducted to raise awareness, while MCH volunteers provide clean delivery kits, contraceptive pills, condoms and oral





Top: A babyweighing day event

Right: A microfinance client at her shop



Summary of Key Results:

- 60% of women delivered with skilled birth attendants, 2x the percentage in Year 2
- 93% of newborns received a newborn visit by an MCHD
- 95% of women used Clean Delivery Kits for deliveries
- Children benefitting from Shae Thot programming are five times less likely to suffer from severe malnutrition than the national average
- 42,634 community members have participated in health education sessions to date

rehydration salts directly to ensure there are not gaps between mobile clinic visits.

MSI is currently operating mobile clinics in nine wards in Shwepyithar, covering about 140 sub-wards. MSI works from 43 focal points, visiting each point once every two to three months. During Year 3, MSI provided services to a total of 4,250 clients, of which 77% (3,266) were new clients, accounting for an increase of nearly 1.5 times those receiving care during Year 2. During Year 3, MSI increased the number of outreach workers in an effort to strengthen the project's aim of raising awareness of MCH issues in Shwepyithar. The large increase in clients served presumably demonstrates the success those efforts had in increasing the number of people seeking care from mobile clinics.

To improve awareness of proper health, 1,098 educational health sessions were conducted for 12,919 people across the implementing wards. Through sessions on safe motherhood practices, all pregnant mothers were encouraged to return for a minimum of four antenatal care visits. Mobile clinics provided 1,054 initial ANC visits, 365 visits were provided for those seeking coverage two or more times, and 13 visits were for those receiving four or more visits. Of the 1,054 pregnant women who came for an initial ANC visit, 29% (301 women) received tetanus toxoid (TT) injections (first or second dose) at a mobile clinic during the reporting year. In the previous year, TT injections were provided to almost all of the pregnant mothers who received care from the mobile clinics. However, during Year 3, the MSI team facilitated linkages with basic health staff and midwives provided TT injections for pregnant mothers in the area. Therefore, the seemingly low coverage rate reflects the need for project staff to only provide injections to those pregnant women who were unable to regularly access MCH services from the midwives. This change represents project staff's **effectiveness in collaborating with basic health providers to ensure pregnant women have access to these services**.

Of those receiving services, 2,163 clients accessed family planning services. Of these clients, 1,426 new clients received voluntary family planning services according to their choice, and 737 clients returned from previous years to continue their use of family planning services from mobile clinics. Mobile clinic staff completed 738 consultations for childhood illnesses, of which 5% (37 cases) were for under-five children with diarrhea treated by oral rehydration solution (ORS) and 15% (113 cases) were for under-five children with acute respiratory infections (ARI) including pneumonia. The remaining consultations were for other illnesses, such as skin infections and wounds, and for children over five with diarrhea and ARI. Community volunteer MCH Promoters have also proven to be effective in treating diarrhea, providing ORS treatment for 91 under-five children, a rate of nearly 2.5 times more than



4-Clean workshop on mode of transmission of diarrhea



A MSI-led community health education session

those in that same category treated by the mobile clinics.

During the program year, 20 (1 male, 19 female) community volunteers received refresher trainings on MNCH. These volunteers promote messaging and awareness around MCH issues, and enhance the capacity of community members to properly identify and address problems around maternal and child health. As volunteers reside in the communities they serve, they can remain active after the project's mobile clinic activities have ended, continuing to drive sustainable improvements in community knowledge and behaviors around health.

Shwepyithar is comprised predominantly of migrants who lack access to formal health care services such as antenatal care, newborn care and immunization. To provide services, while addressing barriers such as high transport costs and affordability, MSI collaborates with local midwives to conduct mobile clinic opportunities together with immunization services provided by midwives, to increase coverage and accessibility. All pregnant women receiving MSI mobile services were offered the option to register with a midwife for tetanus toxoid injections, as well as immunizations for their children, equipping them to continue accessing basic health services after the project's completion.

Since Year 2, Pact implemented hygiene and nutrition promotion for mothers and children in 83 sub-wards to improve knowledge and promote improved self-care behaviors; the program phased out at the end of Year 3. A total of 3,887 individuals participated in workshops emphasizing the 4-Clean approach to hygiene, and 9,847 hygiene kits were distributed to community-selected households with children under five. A total of 83 project-trained WASH Promoters led sub-wards in the creation of 4-Clean community-action plans, including targets for latrine construction. Communities have also constructed 1,783 fly proof latrines, while WASH Promoters have identified 40 cases of diarrhea, treating 83 % (33 cases) with ORS and zinc. Analysis of baseline and endline data revealed that in response to these efforts, communities have shown improvements in awareness and practices around hygiene and nutrition. As seen in Figure 20, proper hand-washing practices dramatically increased from a range of 2% to 85%.

All 83 sub-wards also received nutrition promotion workshops, involving 5,915 participants and training 83 volunteer Nutrition Promoters to lead community-wide action plans on eating well-balanced diets from the three food groups, as well as exclusive breastfeeding. Nutrition Promoters play a vital role in community mobilization, leading communities in the planning and execution of 109 Nutrition Day and 157 Baby-weighing

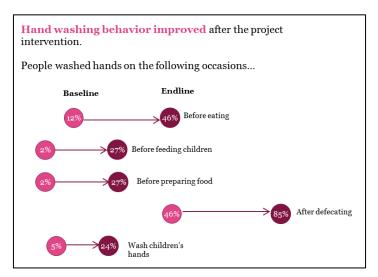


Figure 20: Improvements in hand washing behavior

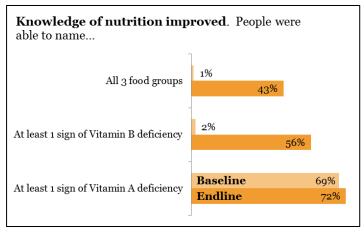


Figure 21: Increases in nutrition knowledge

Days, tracking the growth of 2,748 under-five children. As a result of these activities, Figure 21 depicts how increases in beneficiaries' knowledge pertaining to the three food groups and vitamin B deficiency increased from almost non-existent to 43% and 56%.

Shwepyithar has a large population of marginalized people and a great demand for microfinance services. Currently, PGMF is providing loans to 6,360 urban households with microfinance services, with 91% of loans used for trading, 5% used for service enterprises, almost 4% for livestock breeding and the remaining used for health and education loans. To date, 22,892 regular business loans have been disbursed for a total of \$2,803,917. To better meet the specialized needs of a peri-urban population, PGMF initiated an adapted, market-centered microcredit program in July 2013, which currently serves 85 market borrowers. Peri-urban areas such as Shwepvithar require different loan vehicles to better target the needs of urban markets, so PGMF designed the market program based on the feedback and comments of local grocers and sellers in three different market centers. Because the borrowers are not part of a community-based solidarity group, borrowers are required to save approximately 2.5% of the loan size through small installments and then are charged interest at 0.15% a month. In an area where small-scale business loans are given by moneylenders at 40-60% interest rates, this is an opportunity for building sustainable livelihood activities that is in high demand. In January 2014, services were further expanded to offer micro and small enterprise (MSE) loan products, now constituting of 386 loans totaling \$123,512. These loans are slightly larger than typical microfinance loans (an entrepreneurial loan is generally \$500) and provide an unmet resource for entrepreneurs with existing businesses and the ability to save and contribute a small percentage of the total loan in initial capital.

As urban populations are more susceptible to risks, the PGMF Beneficiary Welfare Program is valued by clients. Currently, 6.360 individuals are participating in the BWP, which has a fund balance of US \$32,991. To date, 19 borrowers' families received cash assistance from the program paid out due to death. Seventeen loans have been written off for losses totaling \$1,117. A total of \$3,455 has been disbursed for 105 education loans and \$4,848 has been dispersed for 94 health loans, while 46 women have received \$2,527 in loans for child-delivery support.

The program also provides non-formal business education (NFBE) to develop local microfinance capacities so that entrepreneurs can run successful businesses and incomegeneration activities. To date, 192 micro-finance centers have been established to support enterprise development and 292 NFBE trainings have been conducted.



Beneficiaries participate in fund disbursement



An active borrower at her fruit shop

From July 2013 to June 2014, UN-Habitat also conducted water and sanitation activities in Ward 14 of Shwepyithar Township, serving 1,422 households with 6,114 beneficiaries (2,977 men, 3,137 women). In Shwepyithar, most households lack a stable source of sufficient water and improper sanitation is pervasive. Most residents access water through shallowtube wells; some also purchase water from private deep-tube wells. Test results from both deep and shallow tube wells in the community revealed that iron content is much higher than WHO deems fit for human consumption. While bottled water is available for purchase, not many community members can afford to rely on it alone. During the nine-month period in which UN-Habitat was active, activities focused on drilling tube wells with submersible pumps, constructing pump houses, setting up six ground tanks with 40 household aeration systems, 84 sanitary fly-proof latrines, 120 household bio-sand filters, and 3,500 feet of sixinch think,12 foot-wide concrete roads. Through UN-Habitat's community-driven People's Process, communities planned and conducted the infrastructure projects, through the support of Community Development Committees (CDCs) and active participation from community members. A Ward Water Committee was formed and trained in operations and maintenance training to guide sustainability beyond Shae Thot's presence. Now communities can access clean water from which the iron concentration has been removed. The CDC has set community water rates at a low, reasonable price, with generated revenue being used to support operations and maintenance of the system. The community's awareness of proper water and sanitation has improved and the project has provided free drinking water to three primary schools that previously could not supply water for the students.



Ward-14's project-supported water treatment plant



4. Semi-Annual and Annual Performance Management Data (Annex A)

Semi-annual and annual performance management data include the required indicators listed in the program's Performance Management Plan (PMP) that can usefully show the project's results. These data are presented in Annex A. Most data are collected through Shae Thot's routine monitoring system and are reported on quarterly, though a few indicators will be measured on at baseline, midterm and endline. For these indicators, the next wave of data will be available after collection of midterm data. While this data collection was completed this fiscal year, the evaluation consultant team was processing the data at the end of the yea; results will be included in Year 4 reports.

Shae Thot submitted revised targets to USAID in November 2013. However, budget reductions required changes to Year 3 activities that affected targets. Results are presented against the revised Year 3 targets.

Shae Thot conducted an annual review of the PMP indicators during the fourth quarter, and the revised PMP was submitted in USAID in September 2014. Data are reported in line with the revised PMP. This affected the definition of some indicators, and those adjustments are noted accordingly in footnotes throughout Annex A where applicable. These indicators provide up-to-date, vital programmatic information to judge the breadth, scope and short-term outcomes of the Shae Thot program.



5. Monitoring and Evaluation and Environmental Compliance

Monitoring and Evaluation

Midterm: Shae Thot began the process for an external midterm evaluation in November with the formation of a midterm working group, which established the following objectives for the midterm evaluation:

- 1. To analyze key project outcomes compared to baseline and control group measurements in order to assess progress towards the project objectives.
- 2. To assess the integrated approach of Shae Thot and interactive effects of overlapping program interventions.
- 3. To collect and analyze qualitative data to assess changes in communities over time and response to evolving program context.
- 4. To collect baseline data for key outcomes in new project areas (where activities begin in 2014).
- 5. To give recommendations and lessons learned for the final years of implementation.

An RFP for an evaluation team was released in February, and the research firm TNS was hired in May to conduct the evaluation after a competitive procurement process. TNS began work in that same month with interviews of key stakeholders. They also conducted a 5,000

household quantitative survey from July-August, surveyed focus groups and key informants in July, and finished entering and cleaning all data in September. TNS will be submitting the final evaluation report in the first quarter of FY15.

The midterm evaluation will be a key learning opportunity for Shae Thot and USAID to understand what project strategies have worked and can be replicated, and where there are opportunities for improvement and strengthening. In particular, the evaluation will include quantitative data that will help us understand where the project has been most successful in changing the lives of beneficiaries at the outcome level. The lessons learned from this evaluation will help to improve project activities and thereby the over 2,000 communities where Shae Thot works.

Database: Shae Thot began setting up a new cloud-based database in February 2014, based on the DevResults platform. The database is now live online, with project back data more than 90% uploaded; the platform was used to compile the PMP data presented in this report. In the first quarter of FY15, project managers and technical staff will be trained in how to use the platform.

A cloud-based database makes the project data accessible to a much wider range of stakeholders, including managers in the field and donors, for evidence-based decision-making. The database will facilitate the process of sharing data and enhancing transparency within the Shae Thot consortium. The database's integration with geodata and standardization of data management will also facilitate analysis and comparison of indicators to allow stakeholders to better understand the project's progress and impact.

Local Partners: The Shae Thot M&E unit provided intensive training and mentoring to local partners. The capacity development support began in February, with a training event for all partners in the basics of M&E systems. Partners developed logical frameworks and indicators during this workshop. Following the initial training, capacity development support moved towards mentoring to become more tailored to individual partners' needs, since partners have different strengths and levels of experience (see partner breakdown of OPI scores). Each local partner developed a comprehensive M&E plan, targets, data collection tools, basic databases to collate data, and conducted a baseline evaluation. High quality M&E processes are the foundation for reliable reporting and the ability to make evidence-based decisions. Understanding how to collect, collate and analyze data to demonstrate project achievement and change caused by the project will enable partners to test and improve their project models, demonstrate their impact to potential donors and thereby improve sustainability, and meet the reporting requirements

involved in graduation to direct funding.

Integrating ICT: The M&E unit continued to improve the use of ICTs to improve data collection systems and data quality. Besides the above implementation of a cloud-based database, Shae Thot continued to use Magpi to collect periodic survey data through mobile phones and began to use this platform to collect regular monitoring data on frequency of mentoring visits to local partners. In addition, Shae Thot began a feasibility study to use mobile data collection for regular monitoring data collection in the field, including a pilot of this in Magway township. Mobile data collection also enabled the improvement of the project's geodata, through collecting village coordinates using mobile phones, and therefore the project's ability to make custom maps and use them for planning. Shae Thot promoted this use of ICTs in M&E in a number of forums, including the 2014 Mobiles Conference in Bangkok, the ICT4D working group, the Information Management working group, and periodic workshops including the Yangon Technology Salon and CommCare's mobiles for development workshop.

Using ICTs for data collection in innovative ways can improve data quality, improve the speed of data submission and entry, and improve data collection management. All of these things make data more useful for decision-making and management.

Environmental Compliance

In November, USAID conducted an environmental compliance visit. Aaron Brownell, USAID/Asia's Regional Environmental Advisor, and Aung Naing, USAID/Burma's Mission Environmental Officer and Shae Thot alternate AOR, traveled to the Shae Thot offices in Magway and Aunglan. Shae Thot staff briefed the team on the project and its environmental aspects, and the USAID officials conducted trainings on Environmental Sound Design and Management. The team conducted site visits to four villages, where they observed project activities conducted by Pact, CESVI, UN-Habitat, and MSI. Pact circulated the Regional Environmental Advisor's report to Shae Thot partners and reviewed the findings and discussed next steps at the February Shae Thot partner meeting.

In June, Shae Thot held a workshop for consortium members to discuss the project's initial Environmental Examination and Environmental Mitigation and Monitoring Plan, based on the observations and recommendations made by USAID. The workshop objectives were to: 1) review the environmental guidelines that govern the Shae Thot program; 2) To revise and update the project environmental compliance documents for re-submission to USAID for approval; 3) To agree on the process for ensuring all relevant staff understand the guidelines and how to apply them, for monitoring and for reporting.

Consortium partners working in each sector discussed the actions they are currently taking to mitigate and monitor their environmental impact, and ways in which they can improve those actions. This workshop resulted in a draft updated IEE and EMMP and renewed sensitivity to the environmental impacts of the project. Partners have since worked to strengthen their environmental compliance procedures and monitoring. The final revised IEE and EMMP were submitted to USAID for review and approval in September.



6. Management and Personnel Changes

As Shae Thot's efforts around the project's Strengthening Community and Civil Society Institutions objective have intensified to take advantage of opportunities arising from Burma's dynamic transition, Pact hired a Capacity Development Manager in November to lead this part of the project. Pact has since established a full team to manage the Village Development Committee pilot project, capacity strengthening for the local partners and the Shae Thot beneficiary accountability system.

In order to better manage the rapid growth in activities this year – growth of the program in Kayah and launching Shae Thot in new townships in the Dry Zone, as well as placing increasing focus on issues such as environmental compliance and beneficiary accountability – Pact has reorganized its management structure. Under this revised structure, program operations activities are separated out from the program implementation unit and consolidated in a new parallel unit.

As more international corporations, donors and development organizations enter Burma, competition for personnel continues to increase. Shae Thot has experienced an increasing rate of turn-over of skilled staff both in Rangoon and the field. Recruitment of replacements for several key positions has proven difficult, with several positions remaining unfilled even after multiple rounds of advertising. Pact and partners have been exploring additional outlets for position announcements, and have had to devise flexible approaches to manage the tasks of open positions.

Pact also reorganized its country office, moving to a "one program" structure. This new structure ensures common technical oversight of Pact's programs, enabling each program to benefit from the models and lessons of the others. As part of this reorganization, the Shae Thot Deputy Chief of Party assumed added duties as director of programs for Pact's overall operations in Burma. The DCoP now devotes approximately 20% of her level of effort to the new position. In addition, Pact's monitoring and evaluation function now serves all Pact programs, and Shae Thot M&E staff allocate their time according to the hours worked on each project.

In December, Pact relocated its offices, excluding the Pact Global Microfinance Fund unit, to a new space on Bo San Pat Road in downtown Rangoon. Rent prices at the former office had increased dramatically over the past several years, and the landlord was seeking another increase of 150%, prompting Pact to seek alternate space. The new office has an open floor plan, which facilitates more frequent interaction and easier communication among units, and the modern décor and abundant natural light enhance employee morale. By the end of the fiscal year, the lower rent for the new space offset all costs from the move, and will subsequently save program funds that would otherwise have gone to rent.

In April, Pact's global senior director of finance operations visited the Myanmar office to work with the Burma country office finance department to review internal control processes, and in May, the finance director of Pact's country office in Tanzania traveled to Yangon and three field offices to complete an internal review of the Myanmar country office's internal control procedures and practices. Overall the country office had a low level of associated risk, but there were concrete suggestions for improvement that the country office has since integrated into policies and procedure revisions.

In early May, Pact held a Shae Thot management retreat for Senior Pact staff. The four day retreat had four objectives including 1) Celebrating the achievements of the first half of the Shae Thot program, and to identifying areas for improvement for the second half; 2) Generating, discussing and agreeing on core values and principles that guide our work as a team; 3) Improving all participants' understanding of the many parts of the overall Shae Thot program, and how they work together to deliver produce shared success; 4) Introducing the revised Shae Thot organizational structure and clarifying roles and responsibilities of each team. Some routine procurement and financial functions have been moved out of township offices into regional offices to ensure better compliance and better program quality through freeing time for township managers to spend more time in villages with their implementation teams.

Managers and key staff from each of the Shae Thot international consortium partners met for routine quarterly Partner Meeting. Topics discussed at these meetings included highlights from the program semi-annual report, operationalizing the beneficiary accountability system, reactivating the Village Development Committee Working Group to reinforce a common approach to working with VDCs in program villages, preparing for the Shae Thot mid-term evaluation, updates in safety and security of program staff, managing the uncertain budget and workplan changes and devoting more attention to capturing and reporting on program outcomes and impact.

In June the Pact country office held a strategic planning retreat to define a country strategy for 2014-2019. The three strategic objectives defined during the retreat include: 1) Replicate and deepen Pact's integrated community resilience approach; 2) Connect communities for collective impact, and 3) Amplify community voice in the GoB decentralization process. Pact's work leading Shae Thot has positioned Pact to work toward these strategic directions at scale, and the activities defined to advance the objectives will strengthen the consortium's implementation of the program.

This year Pact established a global Integrated Approach Community of Practice, a virtual learning network with the objective of harnessing Pact's multi-sectoral expertise and collect, analyze and synthesize project experience and draw out common elements and good practices. Shae Thot's program model, which integrates multiple development sectors through a local governance approach, is a leading example of such interventions. At a global meeting in May the Shae Thot DCoP and Senior program Coordinator presented a Shae Thot case study, which generated great interest among participants.

Recognizing the power of the growing international corporate presence in Burma, and the mutual interests of the Government of Burma, USG, corporations and Pact, Pact has actively been developing opportunities for public-private partnership (PPP) around the Shae Thot program. In January Pact initiated the second phase of the Chevron-supported SHINE project, which contains a cost-sharing input from Shae Thot, in order to leverage investments from both donors.

In addition to the November environmental compliance trip, Shae Thot hosted two other USAID delegations in the field. In May, the Acting AOR and Mission Health Technical Advisor from the Office of Public Health visited Shae Thot offices in Magway and Aunglan townships for presentations form the different Shae Thot partners and visited two villages in each township to see how the different program components were integrated at the village level through coordination by the VDC. In August, program staff hosted the Deputy Assistant Administrator, the new USAID/Burma Director of Democracy and Governance on a visit to the Meiktila office and three nearby villages. The consortium is planning an event to commemorate the 2,000th program village for the first quarter of the new year, which the US Ambassador and USAID Mission Director are expected to attend.



7. Problems Encountered and Response

The most substantial challenge the program faced this year was around the value of the total obligation for the year. As the project partners were finalizing their workplans and budgeting for FY '14, the expected additional obligation available from USAID was slightly over 11 million dollars. This was an increase from the initial figure of 8.4 million dollars, which Shae Thot management had maintained would be insufficient for the keystone year of program implementation – program Year 3 is the final year in which Pact could initiate its three-year program cycle in new townships, and the mid-point of the program is time to consolidate the achievements of the first two years of programming; to invest in human resources, processes, and systems to promote sustainability of program benefits beyond the life of the project; and to further develop programming in new, strategically important areas.

Recognizing the importance of this year to the program, USAID worked to identify additional funds, and just as the year was getting underway, informed Shae Thot management that the higher obligation was possible. The consortium partners planned for the year and began implementation commensurate with the higher obligation amount. However, in mid-December, USAID informed Pact that the amount that was actually available for the project for this fiscal year was in fact 8.4 million dollars, a reduction of nearly 25%.

Each of the Shae Thot partners revised their annual work plans, targets and budgets downward accordingly, while Pact entered into extended discussions with the Burma Mission about the possibility of identifying additional funding for the year. In March, USAID informed Pact that, despite extensive efforts on the Mission's part, it was not possible to secure additional funding; however, it might be possible to obtain an early obligation from next year's budget.

Several months of uncertainty about the funding that would be available for the year resulted in a lack of clarity on how to proceed. Given that notification about the reduced amount came two and a half months into the year, partners urgently had to consider the implications on their activities and notify villages and authorities of the likely need to a scale back activities. The sudden reductions created challenges around explaining the need to scale back on commitments made, both within communities and also with authorities. In addition, the Shae Thot partners had to spend time and energy reworking plans and budgets with each shift in understanding about the funds that would be available. As a result of the uncertainty, the full project workplan for the year was delayed, with partners operating first on plans for full obligation, then for reduced obligation, while holding out hope for the full amount, and planning for rapid scale up should the additional funds come through. Once the obligation for the fiscal year was fully clarified in March, all partners updated their reduced workplans and targets for the balance of the year.

All consortium partners have worked hard to minimize the impact on programming on the ground, postponing interventions and activities, reducing travel, where possible, though had to make difficult decisions – in some cases canceling or postponing activities, in others, phasing out from Year 1 townships months earlier than the planned program cycle.

Toward the end of the year, the USAID mission managed to secure an early obligation for the coming fiscal year, which enabled the program to continue implementation without further scaling back through the fiscal year and to begin the new year at full pace with additional funds.

Delays in Approvals and Procurement

While most requests from approval are processed in a timely manner, a few have remained under review for an extended period of time – in particular, those that require multiple levels of review/approval or require several rounds of questions and answers. Examples this year included approval for pharmaceutical procurement, for donating pharmaceuticals due to expire before they could be used in programming, for a small-scale irrigation project and for a local part to establish a seed bank mechanism. Delays result in postponed program activity and necessitate rebudgeting and replanning.

In addition, Pact has faced some procurement challenges. To address these problems, Pact has worked with the Mission to develop a more systematic and regular interaction on approvals, and has streamlined its procurement processes.

Community Complaints

Although the project beneficiary accountability system is in the process of being transformed from a guiding manual to a functioning system across the project, a few communities have demonstrated initiative to report dissatisfaction with elements of project implementation. Pact and the consortium partner concerned held discussions about the nature of the complaints and have worked with the communities to resolve the issues. One case, which was exacerbated by pre-existing community divisions, was not fully resolved to the satisfaction of some community leaders by project management. In discussions about the case with the township authority, who had also been contacted by the dissatisfied faction in the village, the township authority elected to assume responsibility for making a decision about how to resolve the concerns.

Procedural Constraints

The government of Burma requires that travel approval for international staff is submitted at least a month advance of travel. This requirement hinders the ability for international staff and advisors to respond to challenges that arise, provide support to field offices and participating villages or conduct site visits other than those planned well in advance. Given the dynamic nature of operating in this transitional environment, this restriction hinders the flexibility often required.

Official permission through Memoranda of Understanding with government ministries must be obtained before any project work can be undertaken. Pact recently learned that renewing or amending MOUs will require at least 10 months to complete. Again, such requirements restrict the ability of the program to respond to newly identified needs in new locations. Pact remains in close contact with relevant ministry officials to facilitate these processes.



8. Information on Cost Overruns and Spending

As of the end of September 2014, a total of \$42,476,026 had been obligated for the Shae Thot program, and the program had spent and sub-obligated a total of \$35,470,900 against this amount. Despite the uncertainty around the total funds available mentioned above, the final spending total for the fiscal year came in at almost exactly the \$13.9M final budget figure for the year.

9. Annex A: Program Management and Required Indicator Reporting

Indicator	Jul-Sep 2014	Year 3 Cumulative	Project Cumulative	Year 3 Target (Cumulative)	% Achieved			
Objective 1: Improved Maternal, Newborn, and Child Health								
Activity Outputs								
Number of people trained in child health and nutrition through USG-supported health area programs (3.1.9-1)	100,617	293,692	540,040	503,194	107%			
Community members	99,534	$291,108^2$	534,672	498,295				
Health workers and volunteers	1,083	$2,584^{3}$	5,368	4,899				
	Ou	tcomes						
Outcome 1.1: Communities have immedia	ite access to resource	s for health care	, including emerg	gencies				
# of individuals who received treatment through mobile clinics	9,075	28,289	66,767	60,339	111%			
Men	1,951	5,730	13,649					
Women	7,124	22,559	53,118					
# of cases of clients who received treatment through mobile clinics	21,653	77,170	150,035	178,945	84%			
Care for under 5 children	4,366	13,8984	27,9065	24,021				
ANC	4,064	12,703	$22,383^6$	16,734				
Family planning	11,152	38,476	63,496	44,077				
Other MCH Services	1,632	10,505 ⁷	33,202					
Other	439	1,588	3,048	94,113				

² 102 individuals were added to the FY14Q3 achievement after fixing a formula error in the source data file.

³ 7 individuals were added to the FY14Q3 achievement to include data from local partners that had not been reported.

⁴³⁶ individuals were added to the FY14Q1 achievement after fixing formula error in the source data file.

⁵ 228 individuals were subtracted from the FY13Q4 achievement after fixing a formula error in the source data file.

⁶ 194 individuals were added to the FY13Q4 achievement after fixing a formula error in the source data file.

⁷ 16 individuals were added in the FY14Q1 achievement after fixing a formula error in the source file.

Indicator	Jul-Sep 2014	Year 3 Cumulative	Project Cumulative	Year 3 Target (Cumulative)	% Achieved
Outcome 1.2: Increased access to family 1	olanning services an	d knowledge of o	ptions		
% of married women of reproductive age who knew of at least 3 contraceptive methods				32%	Data in FY15
Outcome 1.3: More women receive all key	focused ANC interv	entions			
# of pregnant women who received 4 or more ANC visits during their last pregnancy	277	1,342	1,963	1,566	125%
# of pregnant women who received 2 tetanus toxoid injections during their last pregnancy	497	2,518	4,606	4,343	106%
Outcome 1.4: More women deliver with a	t least a trained birt	h attendant			
# of women who gave birth with a skilled birth attendant	399	1,638	2,830	2,970	95%
Outcome 1.5: Improved post-natal follow	-ир				
# of newborns receiving postnatal health check within 2 days of birth.	209	1,190	2,424	2,214	109%
Male	106	5848	1,195		
Female	103	6069	1,229		
Outcome 1.6: Improved Nutrition for Chi	ldren				
% of children exclusively breastfed (3.1.9-4)				59%	Data in FY15
Average diet diversity score for children (6 – 59 months)				3.3	Data in FY15
# of children whose growth is tracked through community weighing days	4,430	10,211	22,639	28,195	80%
Male	2,197	5,093	11,340		
Female	2,233	5,118	11,299		
Outcome 1.7: Improved prevention and to	reatment of childhoo	d diseases			
# of detected malaria cases that were treated with effective anti-malaria medication	0	0	0	21	0%

 $^{^{8}}$ 4 individuals were added in the FY14Q3 achievement after correcting a data entry error in the source file. 9 4 individuals were subtracted from FY14Q3 achievement after correcting a data entry error in the source file.

Indicator	Jul-Sep 2014	Year 3 Cumulative	Project Cumulative	Year 3 Target (Cumulative)	% Achieved
# of cases of diarrhea among children under 5 treated with ORS	755	2,029	3,079	2,290	135%
Outcome 1.8: Communities more effective	ely monitor and nurt	ture children			
% of children under 5 whose births were registered				45%	Data in FY15
Obj	jective 2: Improved h	ousehold-level fo	ood security		
Activity Outputs					
# of individuals who have received USG supported short term agricultural sector productivity or food security training (4.5.2-7)	4,524	16,419	29,410	21,324	138%
Men	2,767	11,23110	21,54411		
Women	1,757	5,18812	7,86613		
# of individuals who received financial literacy training	6,517	19,411	62,275	50,170	124%
Men	158	1,142	2,576		
Women	6,359	18,269	59,699		
Outcomes					
Outcome 2.1: Increased access to fair find	ancial services				
Value of Agricultural and Rural loans disbursed (in USD) (4.5.2-29)	\$ 2,970,256	\$ 10,075,635	\$ 14,731,553	\$ 9,408,454	157%
Microfinance institutions	\$ 2,784,238	\$ 8,186,450	\$ 12,159,294	\$ 7,321,449	
Savings groups	\$ 186,018	\$ 1,889,18414	\$ 2,572,259	\$ 2,087,005	

 $^{^{10}}$ 16 individuals were added to the Year 3 result after correcting the summary files to match source documents.

to individuals were added to the Year 3 result after correcting the summary files to match source documents.

41 individuals were subtracted from the Year 1 and Year 2 achievement after correcting the summary files to match source documents.

5 individuals were subtracted from Year 3 achievement after correcting the summary files to match source documents.

41 individuals were added to the Year 1 and Year 2 results after correcting the summary files to match source documents.

¹⁴ \$75 added to the FY14Q3 achievement after correcting the summary files to match source documents.

Indicator	Jul-Sep 2014	Year 3 Cumulative	Project Cumulative	Year 3 Target (Cumulative)	% Achieved
Total number of clients benefitting from financial services provided through USG assisted intermediaries (4.7.1-22)	8,134	20,689	64,557	52,925	122%
Microfinance institutions	4,863	14,388	48,173	33,925	
Savings groups	3,271	6,301	16,384	19,000	
Men	306	1,051	2,881	1,813	
Women	7,828	19,638	61,676	51,112	
Outcome 2.2: Increased income and hous	sehold assets				
Value of interest earned by savings groups	\$11,451	\$119,292	\$168,134	\$172,036	98%
Outcome 2.3: Expanded use of more effec	tive agricultural tecl	hniques and inpu	ıts		
# of hectares under improved technologies or management practices as a result of USG assistance (4.5.2-2)	550	4,50515	6,29516	4,295	147%
# of farmers and others who have applied new technologies or management practices as a result of USG assistance (4.5.2-5)	2,857	12,312	21,126	15,261	138%
Men	2,007	9,18817	16,240 ¹⁸		
Women	850	3,12419	4,88620		
Objective 3: Increased access to sufficient quantities of water, potable water, and improved hygiene					
Activity Outputs					
# of community based water systems built or renovated	195	318	1,34221	1,282	105%

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 $^{^{15}}$ 1 hectare was subtracted from FY14Q3 achievement after correcting the summary file to match source documents.

¹⁶ 2 hectares were subtracted from FY13Q4 achievement after correcting the summary file to match source documents

¹⁷ 1 individuals subtracted from Year 3 achievement after correcting the indicator formula to exclude double-counted beneficiaries.

¹⁸ 8 individuals were subtracted from Year 1 and Year 3 results after correcting the indicator formula to exclude double-counted beneficiaries.

 $^{^{19}}$ 3 individuals were subtracted from Year 3 results after correcting the indicator formula to exclude double-counted beneficiaries.

 $^{^{20}}$ 2 individuals were subtracted from Year 1 and Year 2 results after correcting the indicator formula to exclude double-counted beneficiaries.

²¹ 13 constructions were added to FY13Q1 after standardizing construction codes and names. 8 constructions were subtracted from the FY13Q4 to exclude construction that does not benefit the whole community.

Indicator	Jul-Sep 2014	Year 3 Cumulative	Project Cumulative	Year 3 Target (Cumulative)	% Achieved
# of household safe water systems distributed	675	3,437	65,141	65,027	100%
Outcomes					
Outcome 3.1: Improved Infrastructure m	akes safe water more	e available			
# of people in target area with improved access to safe drinking water as result of USG assistance	69,906	135,765	474,455	382,479	124%
% of households using an improved drinking water source				83%	Data in FY15
Outcome 3.2: Increased use of water puri	fication equipment				
% of households that used water purification equipment to treat the household's water				30%	Data in FY15
Outcome 3.3: Households use improved s	anitation infrastruc	ture			
# of people in target population using an improved sanitation facility	11,980	50,160	149,005	111,731	133%
# of improved sanitation facilities built or reconstructed	2,200	9,917	30,060	27,242	110%
Outcome 3.4: Improved hygiene behavior	•				
% of households with soap and water at a hand washing station commonly used by the family (3.1.6.8-1)				76%	Data in FY15
Objective 4: Strengthened Social and Com	munity Institutions	for Development.	•		
Activity Outputs					
# of village development committees supported by USG funds	31	412	1,12622	1,19023	95%
# of community sub-groups supported by USG funds	1,303	3,870	12,433	13,122	95%
Village Health and Development Funds	214	424	762		
Income Generation Groups	972	2,875	9,632		

²² The indicator definition was revised to exclude Water Committees where a separate VDC structure does not also exist. These Water Committees will be counted only under sub-groups. This resulted in a decrease of 431.

²³ Target adjusted to subtract Water Committees.

Indicator	Jul-Sep 2014	Year 3 Cumulative	Project Cumulative	Year 3 Target (Cumulative)	% Achieved	
Women's Savings Groups	108	236	636			
Water Committees	9	225^{24}	693			
Agricultural Groups	0	55	355			
Livestock Groups	0	55	355			
% of community organizations with a community action plan			97.3%	TBD		
# of VDCs with integrated community action plans ²⁵	NA		NA	TBD		
# of cross-community events (cumulative)				TBD		
# of participants in VDC strengthening training ²⁶				TBD		
Outcomes						
Outcome 4.1: Community institutions are	e transparent and ac	countable to thei	ir community			
# of beneficiary accountability feedback mechanisms established ²⁷	NA		NA	TBD		
# of pilot VDCs which had re-elections this year ²⁸	NA		NA	TBD		
Outcome 4.2: Communities possess a sha	red vision of their de	velopment and	are able to addre:	ss their developn	nent needs	
# of community organizations that increase their COPI score		Set baseline		Set baseline		
% of pilot VDCs which had whole VDC meetings in the last 3 months ²⁹	NA		NA	TBD		
Outcome 4.3: Increased capacity of local organizations to develop and implement development projects						
# of CSOs receiving USAID financial support	0	7	7	7	100%	

 $^{^{24}}$ 1 group was added to FY13Q3 after correcting a data entry error.

²⁵ Activity will begin in FY15.

²⁶ Activity will begin in FY15.

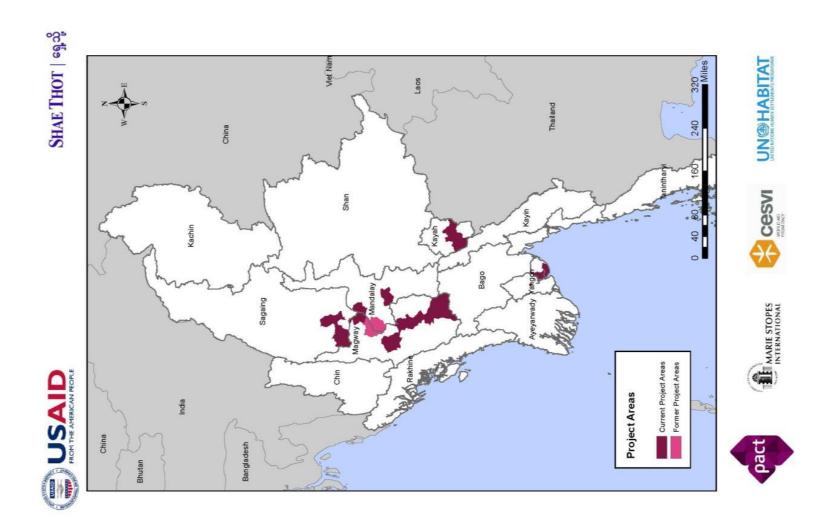
²⁷ Activity will begin in FY15.

²⁸ Activity will begin in FY15.

²⁹ Data collection will begin in FY15.

Indicator	Jul-Sep 2014	Year 3 Cumulative	Project Cumulative	Year 3 Target (Cumulative)	% Achieved
% of CSO institutional strengthening plans >90% on track		Set ISP		Set ISP	
# of CSOs with increased OPI scores		Set baseline		Set baseline	
% change in network connectivity		Set baseline		Set baseline	

10. Annex B: Shae Thot Map



11. Success Stories (attached)